## KEYSTONE OWNERS ASSOCIATION APPLICATION FOR DESIGN REVIEW

## **EACH REQUEST REQUIRES ITS OWN APPLICATION**

All applications for changes to the exterior of your residence must be submitted to the Keystone Owners Association's Architectural Design Review Committee/Board of Directors. The Association's Covenants, Conditions and Restrictions (CC&Rs) require that a homeowner obtain the prior written approval for any structural change, alteration or addition to a property within the community.

Please note that approved applications must be completed in a timely manner. A project completion date is required on the Application. If additional time is required for you to finish your project, an extension request is listed on the second page of these forms.

## To comply with the CC&Rs, please submit this application with all the required attachments

**to:** Keystone Owners Association c/o Vision Community Management

16625 S Desert Foothills Pkwy • Phoenix, AZ 85048

Phone: (480) 759-4945 • Fax: (480) 759-8683

Email: Keystone@WeAreVision.com • Website: www.wearevision.com

If you have not received any form of communication from the Committee or the Association after (45) days, please call Vision Community Management for a status update.

Homeowner's Name:				
Homeowner's Mailing Address:				
City:				
	ss: Email:			
The undersigned hereby submits or the Board of Directors of Keystitem(s): Painting of Residence - Schei	one Owners Associati	on for review an	nd approval of the following	
Body:	Trim:	A	ccents:	
Pop-Outs:	_ Garage:		Front Door:	
Other:				
Installation of Landscaping		Revamping of la	andscaping	
Addition of:			to/on the residence (building)	
_ Addition of:			to/on the lot (property/land)	
Installation of a pool/spa				
Other (please specify):				

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Attached please find plans a appropriate):	nd/or specifications of the	above marked items for ap	pplication, which includes (if
Dimensions (height, wid	dth, length)	Sample of color(s) to b	e used
Drawings		Plant type and location	1
Samples or descriptions	s of materials to be used	Type of material	
Photographs or sample	elevations for a visual pict	ure of the proposed project	
Person doing installatio	n/work:		
Licensed contractor:	Yes No		
Expected completion date:			
Please notify me at not be complete in order to disapprove the Application an with all applicable City, Cour drawing will be retained for the	determine approval or d d return it to me with a stat nty, and State laws and to	isapproval, the Architectura ement for the disapproval.	al Committee or Board will The owner agrees to comply
COMPLETION DATE EXTEN	ISIONS are available if requ	uired. If this application is re	valuesting an extension what
COMPLETION DATE EXTEN	SIONS are available in requ	uned. In this application is re	equesting an extension what
is that date:	•	uirea. II triis application is re	equesting an extension what
		··	equesting an extension what
Homeowner's Signature  Keystone Owner  Approves the above ap	FOR ASSOCIAT rs Association Architect plication	Date: _	ard of Directors
Homeowner's Signature  Keystone Owner  Approves the above ap  Approves the above ap	FOR ASSOCIAT rs Association Architect plication	Date:	ard of Directors
Homeowner's Signature  Keystone Owner  Approves the above ap  Approves the above ap  Disapproves the above	FOR ASSOCIAT rs Association Architect plication plication with the following	Date:	ard of Directors