

# ANATOLIAN COUNTRY ESTATES HOMEOWNERS ASSOCIATION APPLICATION FOR DESIGN REVIEW

All applications for changes to the exterior of your residence must be submitted to the Anatolian Country Estates Homeowners Association's Architectural Committee/Board of Directors. The Anatolian Country Estates Homeowners Association's Covenants, Conditions and Restrictions (CC&R's) require that a homeowner obtain the prior written approval for any exterior alteration or addition to property within the Anatolian Country Estates 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&R's, please submit this application with all the required attachments to:**

Anatolian Country Estates  
c/o Vision Community Management  
16625 S Desert Foothills Parkway • Phoenix, AZ 850488  
Phone: (480) 759-4945 • Fax: (480) 759-8683  
anatoliancountryestates@wearevision.com  
WEBSITE: www.wearevision.com

The time period for approval begins when this application is received by the Committee. The Committee has up to (60) days to approve, approve with conditions, or disapprove the application. If you have not received any form of communication from the Committee or the Association after (60) days, please call the Community Manager for a status update.

Homeowner's Name \_\_\_\_\_

Homeowner's Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Lot # or Lot Address \_\_\_\_\_

The undersigned hereby submits its Application for Design Review to the Architectural Committee or the Board of Directors of Anatolian Country Estates for review and approval of the following item(s):

\_\_\_\_\_ Painting of residence                      \_\_\_\_\_ Outer building                      \_\_\_\_\_ Walls/fences

\_\_\_\_\_ Installation of landscaping                      \_\_\_\_\_ revamping of landscaping

\_\_\_\_\_ Addition of \_\_\_\_\_ to/on the residence (building)

\_\_\_\_\_ Addition of \_\_\_\_\_ to/on the lot (property/land)

\_\_\_\_\_ Installation of a pool/spa

\_\_\_\_\_ Other \_\_\_\_\_

**(SEE REVERSE SIDE)**

Attached please find plans and/or specifications of the above marked items for application, which includes (if appropriate):

- |   |   |
|---|---|
| <input type="checkbox"/> Dimensions (height, width, length)   | <input type="checkbox"/> Sample of Color(s) to be used  |
| <input type="checkbox"/> Drawings   | <input type="checkbox"/> Plant type and location  |
| <input type="checkbox"/> Type of material   | <input type="checkbox"/> Property plat<br><i>(Requirement for pools, buildings, fences, etc.)</i> |
| <input type="checkbox"/> Samples or descriptions of materials to be used                                    |   |
| <input type="checkbox"/> Any photographs or sample elevations for a visual picture of the proposed project. |   |
| <input type="checkbox"/> Person doing installation/work _____   |   |
| Licensed contractor? <input type="checkbox"/> Yes <input type="checkbox"/> No                               |   |
| Expected Completion Date: _____   |   |

Please notify me at \_\_\_\_\_ if you have any questions. I understand that should the application not be complete in order to determine approval or disapproval, the Architectural Committee or Board will disapprove the Application and return it to me with a statement for the disapproval. The owner agrees to comply with all applicable City, County, and State laws and to obtain all necessary permits. This application and the drawing will be retained for the Association's records.

COMPLETION DATE EXTENSIONS are available if required. If this application is requesting an extension what is that Date: \_\_\_\_\_

Homeowner's Signature \_\_\_\_\_ Date: \_\_\_\_\_

**FOR ASSOCIATION USE ONLY**

**Anatolian Country Estates Homeowners Association Architectural Committee or Board of Directors**

- Approves the above Application
- Approves the above Application with the following Conditions: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
- Disapproves the above Application with the following Reason(s): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Date App. Received	Mailed to Committee	Rec'd From Committee	Mailed to Homeowner
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