CENTRAL AND DOBBINS HOMEOWNER ASSOCIATION APPLICATION FOR DESIGN REVIEW

All applications for changes to the exterior of your residence must be submitted to the Central and Dobbins Homeowner Association's Architectural Design Review Committee/Board of Directors. The Central and Dobbins 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 Central and Dobbins 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. **EACH REQUEST REQUIRES ITS OWN APPLICATION.**

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

Central and Dobbins Homeowner Association c/o Vision Community Management 16625 S Desert Foothills Pkwy • Phoenix, AZ 85048 Phone: (480) 759-4945 • Fax: (480) 759-8683

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

If you have not received any form of communication from the Committee or the Association after (60) days, please call Vision Community Management for a status update.

Homeowner's Name:				
Homeowner's Mailing Address:				
City:	State:	Zip:	Lot #:	
Property Address:				
	Email:			
The undersigned hereby submits i the Board of Directors of Central a following item(s): Painting of Residence - Schen	nd Dobbins Homeow	ner Association	for review and approval of the	
Body:	Trim:	Ac	ccents:	
Pop-Outs:	_ Garage:		_ Front Door:	
Other:				
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 (places enecify):				

APPLICATION FOR DESIGN REVIEW PAGE TWO

appropriate):	and/or specifications of the	above marked items for ap	pplication, which includes (ii
Dimensions (height, wi	dth, length)	Sample of color(s) to b	pe used
Drawings		Plant type and location	า
Samples or description	s of materials to be used	Type of material	
Photographs or sample	e elevations for a visual pict	ure of the proposed project	
Person doing installation	on/work:		
Licensed contractor:	Yes No		
Expected completion date:		-	
Please notify me atnot be complete in order to disapprove the Application ar with all applicable City, Couldrawing will be retained for the COMPLETION DATE EXTER	o determine approval or di nd return it to me with a state nty, and State laws and to ne Association's records.	sapproval, the Architectura ement for the disapproval. obtain all necessary permi	al Committee or Board will The owner agrees to comply its. This application and the
s that date:			
Homeowner's Signature		Date: _	
Central and Dobbins Ho Approves the above ap Approves the above ap		Architectural Committe	e or Board of Directors
Disapproves the above	e application for the following	g reason(s):	
Signature:		Date:	
Date Received	Mailed to Committee	Received from Committee	Mailed to Homeowner