DESIGN REVIEW APPLICATION FORM

Applicant to complete the information below

Submit To:						
Project Location:		Owner:				
		Name				
Lot #	Lot	Mailing Address			-	
Street Address		City/State/Zip				
Legal Description		Phone		-		
		Fax				
Architect/Designer:		Contractor/Builde	er:			
Firm		Firm				
Contact		Contact		<u></u>		
Mailing Address		Mailing Address				
City/State/Zip		City/State/Zip				
Phone		Phone				
FAX		FAX				
Site Information:		House Information	n:			
Lot Size		Enclosed Conditioned				
Original Building Envelope		Enclosed Unconditioned				
Proposed Building Envelope		Covered/Under Roof				
		Building Color	Name	Number		
			Mig	LRV		
	·	·				
Description of Subn	nittal: Attach all necessary o	frawings & information				
				· · · · · · · · · · · · · · · · · · ·		
Applicant:						
As applicant, either as Owner	or Owner's Agent, I have read and understand the Des	sign Guidelines and the CC&R's conc	erning design and constru	etion		
			-			
antinent's electron		·				
pplicant's signature		Print Name		Date		
For Committee Use	Only:					
eceived By						
ale			☐ Preliminary	☐ Approved		

☐ Final

Revision

☐ Building Envelope

☐ Approved w/ Stipe

☐ Revise & Resubmit

☐ Rejected

Scheduled DRC Meeting Date

Pre-Design Meeting Date

Preliminary Approval Date

Final Approval Date