SPRING VALLEY @ UTE CREEK

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DESIGN REVIEW REQUEST HOME PHONE_____ HOMEOWNER _____ WORK PHONE CITY, STATE, ZIP_____Email address_____ PLEASE INDICATE THE TYPE OF IMPROVEMENT THAT YOU ARE REQUESTING. () Cement Work (Driveway, Patio Slab, etc.) () Deck, Patio cover () Exterior Changes (Enclose plans) () Fencing () Landscaping (Enclose plans) () Building Additions (Enclose plans) () Basketball Backboard () Other () Painting-Must paint 2'x2' sample of each color on front of house & also mail Flagstaff Mgmt the sample color chips for HOA records. Please include the required info below for each main area to be painted. Main House:_____Front Door_____ Garage Door:_____Gutters:____ Other:_____ Paint Manufacturer: If you are not enclosing plans for your request, please describe the improvements that you are requesting. See Design Review Request Instructions. I understand that I must obtain approval of the Architectural Review Committee before I commence any improvements. I understand that this approval does not relieve me of my responsibility to obtain building permits from the City of Longmont, if required. All work needs to be completed within 90 days of approval unless an extension is approved by the ARC Committee. Homeowner____ Date Projected Completion Date Architectural Review Committee Action: () Approved as submitted Must be completed by:_____ () Approved with the following Changes. () Disapproved

Date_____Signature

Architectural Review Committee