REQUEST FOR APPROVAL – ARCHITECTURAL/DESIGN REVIEW APPLICATION

Country Fields Homeowners Association, Inc.

% 4 Seasons Management Group, LLC; 9351 Grant Street; Suite 500; Thornton, CO 80229
(303) 952-4004 ~ Phone / (720) 229-0407 ~ Fax / www.4SeasonsMgmt.com

Name: _____

Address: _____

Home Phone: _____

Mailing Address (if different):_____

Email Address: _____

My request refers to the following types of improvement(s): (check all that apply)

_____**Window Replacement**	_____**Painting**	_____**Landscaping**
_____**Hot Tub**	_____**Play Equipment**	_____**Fencing**
_____**Other (please specify)** _____		

ATTACH PLANS & SPECIFICATIONS – include height, width, depth, types of materials, color, location, relation to property line/fencing/neighbor, paint samples, and other information pertinent to the request.

Approval is based on conformance with the Declaration of Covenants, and aesthetic concerns. No representation is made of approval of structural integrity. Drainage issues and existing slopes are crucial elements of exterior changes and should be strongly considered in the installation of any materials.

I understand the approval of the Architectural/Design Review Committee must be obtained before I can proceed with my project. I understand that approval by the A/DRC does not constitute approval by the local building department or any other agency which may require prior approvals. I understand I may be required to obtain permits, licenses, pay fees or obtain other professional opinions and/or certifications. I agree to complete all improvements as they are submitted and understand that I must submit my request if modifications to these plans become necessary. I agree to complete the improvements promptly and in a good workmanlike manner.

Homeowner's Signature:_____ Date:_____

****

THIS AREA TO BE FILLED OUT BY ARCHITECTURAL/DESIGN REVIEW COMMITTEE

Date Received by A/DRC:_____ **Date Approved or Denied by A/DRC**:_____

	Approved as Submitted	**Approved with Conditions**	**Denied as Submitted**
Signature:	_____	_____	_____
Signature:	_____	_____	_____

Conditions for Approval (use reverse side if necessary):

_____

_____

_____

Reasons for Denial (use reverse side if necessary):

_____

_____

_____