

REQUEST FOR APPROVAL – ARCHITECTURAL/DESIGN REVIEW APPLICATION

**Cherrywood Park III Homeowners Association, Inc.**

c/o 4 Seasons Management Group, LLC | 9101 Pearl Street; Suite 104 | Thornton, CO 80229 | (303) 952-4004

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home/Work Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

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

- |  |   |                                   |
|--|---|-----------------------------------|
| <input type="checkbox"/> Landscaping     | <input type="checkbox"/> Shed/Greenhouse  | <input type="checkbox"/> Painting |
| <input type="checkbox"/> Deck/Patio Slab | <input type="checkbox"/> Deck/Patio Cover | <input type="checkbox"/> Dog Run  |
| <input type="checkbox"/> Room Addition   | <input type="checkbox"/> Play Equipment   | <input type="checkbox"/> Fencing  |
| <input type="checkbox"/> Walls-Retaining | <input type="checkbox"/> Other _____      |                                   |

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 Review Committee must be obtained before I can proceed with my project. I understand that approval by the ARC 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: \_\_\_\_\_  
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**THIS AREA TO BE FILLED OUT BY ARCHITECTURAL REVIEW COMMITTEE**

Date Received by ARC: \_\_\_\_\_ Date Approved or Denied by ARC: \_\_\_\_\_

**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):

\_\_\_\_\_  
\_\_\_\_\_