

**HOME FARM COMMUNITY ASSOCIATION
DESIGN REVIEW COMMITTEE
REQUEST FOR APPROVAL**

| | |
|-------------------|-------|
| DATE RECEIVED BY | _____ |
| VISTA MANAGEMENT: | _____ |
| DATE SENT TO DRC: | _____ |
| CRITICAL DATE: | _____ |

Homeowner Name: _____

Address: _____

Home Phone: _____ Work Phone: _____

My request involves the following type(s) of improvement(s): (Check all that apply) **A copy of your plot plan showing location**
of the proposed improvement must be included with this submittal.

| | | | |
|---------------------------------|-------------------------|--------------------------|---------------------|
| _____ Air Conditioning, Central | _____ Driveway Addition | _____ Retaining Wall(s) | _____ Storm Door(s) |
| _____ Basketball Hoop | _____ Walkway | _____ Retractable Awning | _____ Window(s) |
| _____ Deck/Patio Slab | _____ Fencing-Open Rail | _____ Roofing | _____ Landscape |
| _____ Dog Run | _____ Play Equipment | _____ Sauna/Hot Tub | |
| Other _____ | | | |

Describe improvement and mail 4 copies of this form and 4 sets of attached plans or fax or email one set of plans: _____

Anticipated Date of Completion: _____

I understand the approval of the Design Review Committee must be obtained before I can proceed with my project. I understand that approval by the DRC does not constitute approval of the local building department and that I may also be required to obtain a building permit. I agree to complete improvements promptly after receiving approval from the DRC. I have read the Design Review Standards manual and will comply with all requirements.

Homeowner's Signature: _____ Date: _____

FOR COMMITTEE USE ONLY
DESIGN REVIEW COMMITTEE ACTION NEEDED BY: _____

| | | | | | | |
|---------------------------|----------|----------|----------|----------|----------|----------|
| DRC ACTION | 1) _____ | 2) _____ | 3) _____ | 4) _____ | 5) _____ | 6) _____ |
| Approved As Submitted: | _____ | _____ | _____ | _____ | _____ | _____ |
| Approved With Conditions: | _____ | _____ | _____ | _____ | _____ | _____ |
| Disapproved As Submitted: | _____ | _____ | _____ | _____ | _____ | _____ |

Conditions For Approval Include the Following:

Reasons for Disapproval Include the Following:

DRC Member Signature: _____ Date: _____

Return to Vista Management Associates, 8700 Turnpike Drive, Westminster, CO 80031 or FAX# 303.429.2632.