

**INDEPENDENCE PARK HOMEOWNERS ASSOCIATION  
DESIGN REVIEW REQUEST FORM**

HOMEOWNER NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ DAYTIME PHONE: \_\_\_\_\_

**DESCRIPTION OF PROPOSED CHANGE TO EXTERIOR OF HOME PROPERTY:**

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DESIRED STARTING DATE FOR THE PROJECT: \_\_\_\_\_

(Please allow 30 days for Committee's approval)

EXPECTED COMPLETION DATE: \_\_\_\_\_

HOMEOWNER SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Please include with your submittal any paint samples, pictures, drawings, or plans which help explain the project for which you would like architectural approval.

SEND TO:

**ARCHITECTURAL CHAIRMAN  
INDEPENDENCE PARK HOMEOWNERS ASSOCIATION  
c/o BRE REAL ESTATE, INC.  
9331 COMMERCE CENTER ST #1A  
HIGHLANDS RANCH, CO 80129  
FAX: 303-804-9850**

PLEASE ALLOW **30 DAYS** FOR A RESPONSE TO YOUR SUBMITTAL. IF YOU HAVE ANY QUESTIONS ABOUT THE SUBMITTAL PROCESS PLEASE CONTACT VICKI PEPPERS AT 303-804-9800, OR CONTACT ONE OF THE BOARD MEMBERS.

**COMMITTEE RECOMMENDATIONS:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**BOARD OF DIRECTORS ACTION:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

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