

SOUTHBRIDGE 7 HOMEOWNERS ASSOCIATION

DESIGN REVIEW REQUEST FORM

HOMEOWNER NAME: _____

ADDRESS: _____

HOME PHONE: _____ DAYTIME PHONE: _____

DESCRIPTON OF CHANGES TO BE MADE TO THE PROPERTY:

STARTING DATE FOR THE PROJECT: _____ EXPECTED COMPLETION DATE: _____
(Please allow 30 days for Committee's approval)

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
SOUTHBRIDGE 7 HOMEOWNERS ASSOCIATION
c/o BRC REAL ESTATE CORPORATION
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: _____

