

Architectural Review Form

Ironwood Village Association, c/o AZCMS, 15300 N. 90th Street, Ste 800 Scottsdale, AZ 85260
Phone: (480) 355-1190 FAX: (480) 355-1191 Email: ARC@azcms.com

Deed Owner: _____ Daytime Phone: _____ Date: _____

Address: _____ Email Address: _____

LANDSCAPE DESIGN:

Ironwood Village requires that plant minimums be maintained in all front yards at all times (see section VI.M of General Guidelines). Trees are to be planted in the front yard, no closer than six feet (6') to the property line.

My lot is _____ feet wide (measured at the front of the house). I propose to install _____ 24" Box Trees and _____ 5-gallon Shrubs. The varieties are shown on the attached drawing(s), including all hardscape items (boulders, lighting, curbing, etc.). The work is to be performed by _____

Work will start on _____ and be completed by _____

ARCHITECTURAL DESIGN:

Name of Design Change: _____

Type of Material (attach samples/pictures/brochures): _____

Color(s) (samples are suggested): _____

Dimensions: _____ Location on Lot _____ Setback from Walls: _____

EXTERIOR PAINT DESIGN:

† * See Paint Palette

My Roof Tiles (Select One):

Common Light Color (no paint colors marked †) Dark Color (green or custom, no color restriction)

My Window Frames (Select One)

Brown Tone (no paint colors marked *) White (no color restriction)

Any Other Color

Type of Request (select one from the two below):

***Refer to General Guidelines for Painting**

Painting house and walls with **one color** from the current paint palette.

1. **Select only from those colors on the paint palette that are approved for your window frame color and roof tile color.**

Painting house and walls with **two colors** from the current paint palette, (**one base color** and one corresponding **accent color**).

1. **Select only those colors from paint palette that are approved for your window frame color and roof tile color.**

2. **A description of where the accent color is to be applied is required. Use additional pages as necessary and supply accurate drawings or pictures, depicting the areas to be painted the accent color.**

Colors Requested (select color(s) from the color palette / all applicable information must be filled in below):

What is the paint name, D.E. code and paint sheen of the **base color** being used for the body and walls of the home?

Paint Name _____ Paint Code _____

Stucco Sheen: Flat Velvet Metal Sheen: Semi-gloss Wood Sheen: Low Sheen

If you are painting two colors, what is the paint name, D.E. code and paint sheen of the corresponding **accent color**?

Paint Name _____ Paint Code _____

Stucco Sheen: Flat Velvet Metal Sheen: Semi-gloss Wood Sheen: Low Sheen

SUBMITTAL MUST INCLUDE A PLOT PLAN INDICATING LOCATION OF REQUEST AND INCLUDE ALL APPLICABLE MEASUREMENTS AND DIMENSIONS. INCOMPLETE SUBMITTALS WILL BE DENIED.

Committee herein refers to the Board of Directors or the Architectural Review Committee

I agree to comply with all applicable city and state laws, and to obtain all necessary permits. I also agree not to begin work until I have been

notified in writing of the Committee's decision and to maintain all improvements to their original condition. Any work initiated prior to

written approval by the Committee will be considered a violation. Violations may result in a fine, the requirement of the owner to return the

property to its original condition, and/or other changes that may be directed by the Committee. The Committee will review all **complete**

submittals within thirty (30) days of receipt. All work will be completed within sixty (60) days from day of approval. If work is not completed

within sixty (60) days of approval, the owner is responsible for all violations and fines that may result. **Note, Approval by the Architectural**

Committee shall only be for adherence to the Design Intent of the General Guidelines & Regulations of Ironwood Village. The Owner

and Contractor shall be responsible for complying with all applicable city and state laws and regulations.

Deed Owner's Signature _____ Date: _____

Contractor's Signature _____ Date: _____

Approved **Incomplete, Revise and Resubmit** **Not Approved**

Authorized Signature _____ Date: _____