

PROPERTY ADDRESS: _____

North Hill

**This application is to be used for:
Initial Backyard Landscaping, Fencing/Gates and/or Vanity Panels/Pergolas/Arbors.**

The following checklist should be followed to ensure a timely review and approval.

Backyard Landscaping

- Complete this application in its entirety.
- Follow the minimum planting standards of 1 deciduous canopy shade tree and 5 shrubs.
- Select only trees and shrubs/grasses from the approved list.
- Ensure your plan does not exceed 50% grass coverage.
- If you plan turf, follow the “turf” guidelines. If you plan artificial turf, follow the “artificial turf” guideline. If you do not have turf, follow the xeric guidelines.
- Include the plot plan with this application (Can be located in your closing documents).

Fence/Gates

- Complete the Fencing/Gate section of this application.
- Ensure your plan has the wing fences set back at least 10 feet from the front of your house.
- Ensure that your gates measure only 36” wide and are clearly noted in sketch.
- Include the plot plan with this application (Can be located in your closing documents).

Vanity panels/Pergolas/Arbors

- Provide location, dimensions, and materials used.
- Include Finish (Stain color, paint color, composite color, etc.).
- Provide build specifications.
- Provide grounding method (concrete, posts, affixed to house, planted, etc).
- Include cover/rooftop materials, colors, means of securing.

Submit this application with your plot plan the following ways:

My HOA Portal at: <https://my.managementtrust.com>

OR

Email PDFs to: COinfo@managementtrust.com

OR

Mail to: North Hill Homeowners Association 6149 E 141st Dr. Thornton, CO 80602

**The reviewers meet as frequently as possible,
please allow 2 weeks from receipt for an initial response.**

PROPERTY ADDRESS: _____

EXHIBIT B - NORTH HILL HOMEOWNERS ASSOCIATION, INC.
Initial Backyard Landscaping, Fencing/Gates and/or Vanity Panels/Pergolas/Arbors Application
(LANDSCAPING MUST BE COMPLETED WITHIN 270 DAYS OF CLOSING)

Date Submitted _____ Home Closing Date _____ Est. Completion Date _____ Filing # _____ Lot# _____

Owner Name(s): _____ Phone: _____

Property Address: _____

Mailing Address: _____ Email: _____

This application is for: Initial Backyard Landscaping Fencing/Gates VanityPanels/Pergolas/Arbors

INITIAL LANDSCAPING REQUIREMENTS FOR BACKYARD:

The minimum planting standards ARE one deciduous canopy shade tree and 5 shrubs for ALL landscape types.

- All shrubs must be located in mulched planting beds.
- Ornamental grasses and perennials may be substituted for shrubs with 3 grasses/perennials per one shrub.

Please indicate your MINIMUM planting selections (REQUIRED) from the City of Thornton Approved List of Trees and Shrubs:

Deciduous canopy shade tree: _____

Plant/shrub 1. _____

Plant/shrub 2. _____

Plant/shrub 3. _____

Plant/shrub 4. _____

Plant/shrub 5. _____

NOTE: YOU MAY HAVE MORE PLANTS/GRASSES, BUT THEY SHOULD BE FROM THE APPROVED LIST.

Please include landscape description/comments that clarify your application:

Contractor Name/Company (if any): _____ Phone: _____

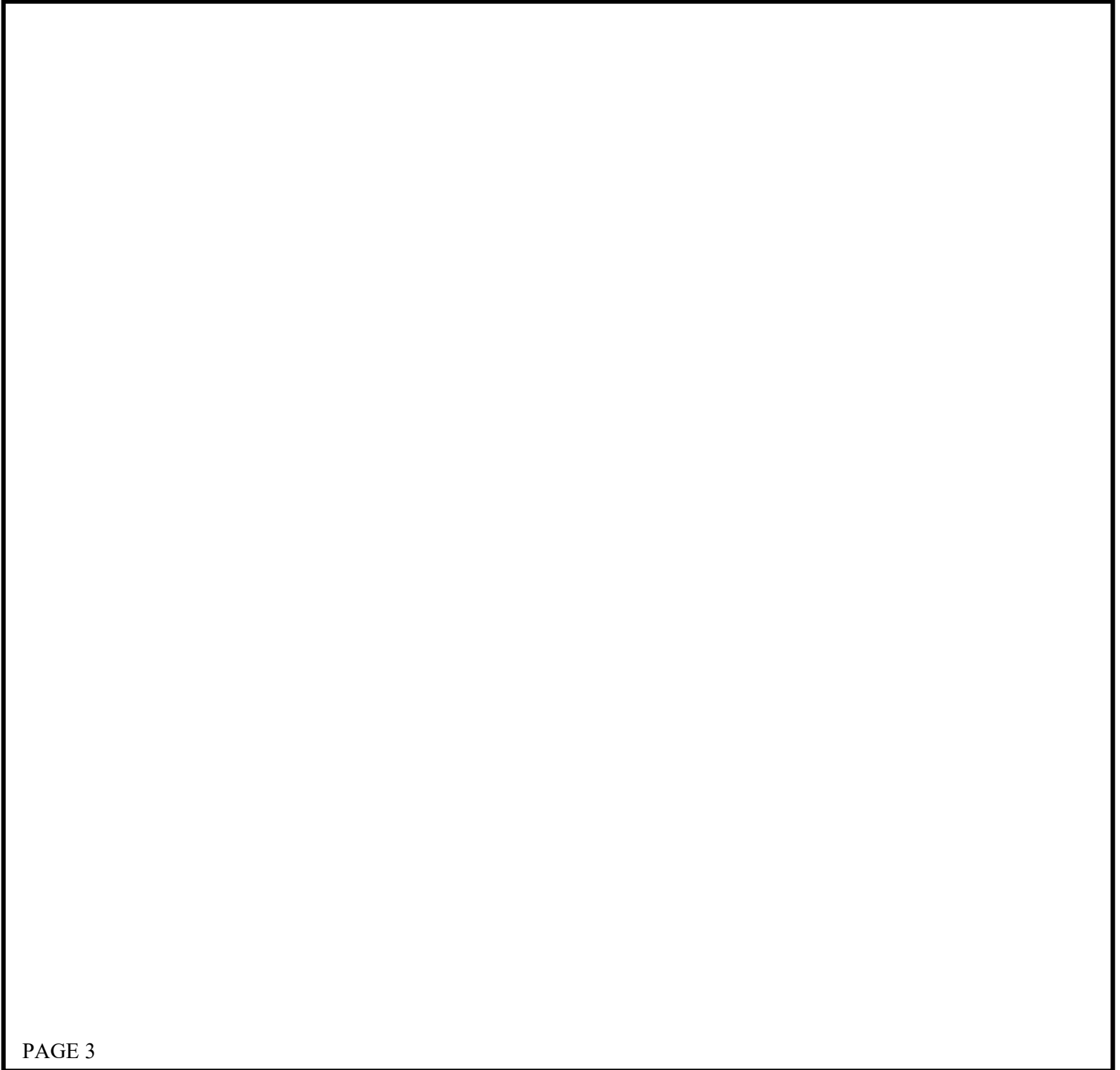
Please refer to the Architectural Guidelines for specifics details and requirements. Other considerations to include with your plans may be: A shed (p. 19), pergola (p. 9), artificial turf or xeric (p. 24), hot tub/gazebo (p. 16), fencing/gates (p.13-14). If these are not included in the initial landscaping application, an additional application will be required prior to their placement.

PROPERTY ADDRESS: _____

Please include these items in your landscape drawing (computer generated plan may be submitted, provided that all measurements and details are included):

- Rock type and color.
- Turf percentage of yard (turf square footage/total landscape square footage).
- Measurements of each item, including back and side lot line dimensions, back and side house perimeters.
- Locations of plants, trees and required shade tree with names included.

Sketch your plan here, as much to scale as possible (use an additional page if needed) or indicate that the plan is attached.



PROPERTY ADDRESS: _____

THIS APPLICATION REQUIRES THE SIGNATURE OF THE HOMEOWNER AND MAY REQUIRE ACKNOWLEDGEMENT OF POTENTIALLY IMPACTED NEIGHBORS.

THE UNDERSIGNED ACKNOWLEDGES THAT IF ANY WORK HAS COMMENCED PRIOR TO THE APPROVAL OF THE REVIEWER, HE/SHE/THEY WILL BE LIABLE FOR ALL COSTS NECESSARY TO BRING THE WORK INTO COMPLIANCE WITH THE CC&R's (DECLARATION) OR DESIGN GUIDELINES.

THE REVIEWER SHALL MAKE A DETERMINATION ON EACH APPLICATION WITHIN FORTY-FIVE (45) DAYS AFTER RECEIPT OF A COMPLETED APPLICATION AND ALL THE INFORMATION IT REQUIRES.

BY SIGNING THIS APPLICATION FORM, I, THE HOMEOWNER, GIVE AN AUTHORIZATION TO THE REVIEWER TO ENTER THE PROPERTY FOR THE PURPOSE OF INSPECTING THE PRE-CONSTRUCTION SITE CONDITIONS AND ALL WORK IDENTIFIED ON THE APPLICATION AS BEING SATISFACTORILY COMPLETED.

HOMEOWNER SIGNATURE REQUIRED

DATE

APPROVAL DOES NOT RELIEVE THE HOMEOWNER FROM MEETING ALL REQUIREMENTS OF THE ASSOCIATION'S GOVERNING DOCUMENTS (INCLUDING CC&R's) AND NORTH HILL DESIGN GUIDELINE REQUIREMENTS, NOR DOES IT CONSTITUTE APPROVAL AS TO COMPLIANCE WITH APPLICABLE COLORADO LAW, CITY, AND COUNTY OF THORNTON BUILDING AND SAFETY REQUIREMENTS OR ZONING ORDINANCES, OR COMPLIANCE WITH THE RULES, REGULATIONS OF ANY OTHER ENTITY WITH JURISDICTIONAL AUTHORITY OVER ACTIVITIES CONTAINED HEREIN.

Landscaping Disclaimer: The homeowner shall hold harmless the Declarant, Builder, Reviewer, Manager, and the Homeowners Association for any and all damages to any party caused by alteration of the grade in connection with the design or installation of landscaping, including damage to the Homeowner's house and/or adjacent houses. Homeowners will be responsible for any damage caused by any change to drainage by themselves or hired contractors.

The following is to be completed by the reviewers only

ACTIONS TAKEN BY THE REVIEWER:

- RECOMMENDED APPROVAL (request submitted is recommended for approval)
- RECOMMENDED APPROVAL AS NOTED (request submitted is recommended for conditional approved subject to noted conditions)
- RECOMMENDED DISAPPROVED (the entire request is disapproved, and **no work may commence** unless application is resubmitted with additional information or acceptable revisions and receives final approval)

Reviewer Signature: _____ Date: _____

Reviewer Name (printed)/Position: _____

Comments/Conditions: _____

