

Homeowner Information:

Name:

Lyons Ridge Metropolitan District

Email: LRDRC@LyonsRidgeMetro.org

Application for Home Improvements and Modifications

In an effort to provide and protect each individual homeowner's rights and property values, it is required that any homeowner considering an exterior modification to their home or property submit an "Application for Home Improvements and Modifications" to the Design Review Committee (DRC). If any change is made that has not been approved, per the governing documents, the DISTRICT may require an owner to change or remove an improvement. In addition, detailed plans, sketches, drawings, illustrations, photographs, dimensions, and digital material pictures should be provided to sufficiently describe the project in detail. PLOT PLAN SHOWING LOCATION OF PROPOSED MODIFICATION IS REQUIRED.

Date:

Property Address:				Email:		
r roporty riddroos.						
Home Phone No.:			Alternative Pho	Alternative Phone No.:		
Mailing Address (if o	lifferent):			Alternative Contact Person/No.:		
Please circle typ	e of requ	est: <u>Is</u>	s this item sub	oject to preapp	oroval? Yes No	
Back-yard Landscape	Exterior Do	or Gazebo/Pergola	Playscape/Structu	re Roofing	Shed/Storage Building	
Front-yard Landscape	Fence	Exterior Lighting	Pool/Spa	Room Additio	n Trees	
Awning	Flagpole	Paint Color Change	Privacy Screen	Solar Panels	Windows/Skylights	
Dog Run	Garden Box	Patio/Deck	Retaining Wall	Sport Hoop/C	ourt OTHER - Describe Below	
Details:						
					roved scheme. You may use the	
Sherwin Williams Homeowner Association Color Archive website to v Please state new paint color:				Portion of house to be painted:		
Trim Color (includes soffit, fascia boards & window trim):			Accent Color (in	Accent Color (includes shutters, window hoods & exterior doors):		
OUTDOOR STRU	ICTURE (If Applicable): Plot ma	ap must be included	with Application show	wing location of building on map.	
			eight of Item(s):		nsions of Item(s):	
Square footage of Item(s):	State location/placement of Ite	em(s):			



Please include a sample of all improvements. (Example: Paint chip/swab/swatch, roofing shingle, siding sample, solar screen sample, etc.) In signing this application, I certify that all the information provided by me in connection with my application, whether on this document or not, is true and complete. I understand that any misstatements, falsification, or omission of information shall be grounds for denial of this application. I further understand that the Design Review Committee has thirty (30) days upon receipt to review my application and I agree not to begin or continue property improvements or modifications until the Committee notifies me, in writing, of their decision. DISTRICT approval does not substitute for any County/State required permits. I understand that I am responsible for adhering to all Local/County/State guidelines. I have answered, truthfully, all questions pertaining to the proposed mentioned improvement or modification and have attached all samples, plans and permits required.

Samples, plans and permits required.					
Homeowner Signature (REQUIRED):	Date:				
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Improvement Start Date:	Improvement Completion Date:				
Recommended neighbor approval by signature:	Address/Phone Number:				
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Recommended neighbor approval by signature:	Address/Phone Number:				

Please return application to: CliftonLarsonAllen LLP

Attn: Celeste Terrell

8390 E Crescent Parkway, Suite 300 Greenwood Village, CO. 80111

And/or Email to: LRDRC@LyonsRidgeMetro.org

For questions, email or call: Celeste.terrell@claconnect.com 303-265-7875 direct line

Special Note: Incomplete plans will be denied and returned.

Design Review Committee Use Only								
Recommendation of the Committee:	Approved	Approved w/ Conditions		nied				
Comments/Conditions/Reason for Denial:								
DRC Member Name:			Date:					
DRC Member Signature:								
O	FFICE USE ON	LY						
DATE RECEIVED:	ACKNOWLE	DGEMENT LETTER SENT:						
APPROVAL DATE:	APPROVAL I	LETTER SENT:						