HIGHLANDS-MEAD METROPOLITAN DISTRICT

Application for Improvements and Modifications
In an effort to provide and protect each individual homeowner's rights and property values, it is required that any Owner or group of Owners considering improvement(s) and/or change(s) to their home or property submit an "Application for Improvements and Modifications" to the Design Review Committee (DRC). If any change is made that has not been approved, per the governing documents, the Owner may be required to change or remove an improvement. In addition, plans, sketches, drawings, illustrations, photographs, dimensions, and material samples should be attached to sufficiently describe the project in detail.

Name Property Address Home Phone No. Mailing Address (if different)			Date			
			Email: LOT#:			
			Work Phone No. Alternative Contact Person/Number:			
Back-yard Landscape	AC Unit	Awning	Dog Run	Door	Fence	
Front-yard Landscape	Gazebo/Pergola	Lighting (exterior)	Paint Color Chan	ge	Pet enclosure	
Patio/Deck	Play Equipment	Pool/Spa	Playhouse/Swing	Set	Roofing	
Room Addition	Satellite Dish	Skylight	Solar Device		Storage Building	
Sport Hoop/Court	OTHER: Describe Below:					
Details:						
PAINTING:						
Please state new paint color			Portion of house to be painted			
Trim Color (include soffit, fascia boards, and window trim)			Accent Color (Includes shutters, windows hoods & exterior doors			
SHED OR STORA	AGE BUILDING:					
Plot map must be in location of building or	ncluded with Application sho n map.	wing Height of bu	ilding	Dimens	sions of building	
Square footage of buildi	ing	1	State location/placement of building			

Where applicable, please include a sample sample, solar screen/awning material sam connection with my application, whether falsification or omission of information sha Committee has thirty (30) days upon receipt until the Committee notifies me, in writing, DRC approval does not substitute for any C guidelines. I have answered, truthfully, all attached all samples, plans and permits rec	ple, etc.). In signing this a on this document or not, is all be grounds for denial of t to review my application an of their decision. If no suc County/State required permit questions pertaining to the	oplication, I certify that all the information is true and complete. I understand that a this application. I further understand that d I agree not to begin property improvement written decision is received, the request s. Owner is responsible for adhering to all	provided by me in any misstatements the Design Review ts or modification is deemed denied Local/County/Star			
Homeowners Signature (REQUIRED)	Dat	Date				
Improvement Start Date	lm	Improvement Completion Date				
Special Note: Please make sure the Incomplete plans will be Denied and Design Review Committee	c/o Evan Redmond, Teleos Managemer 191 University Blv Denver, CO 80200 Phone: 720-618-43 Email: Evan@tele at your plans are comp d returned.	d. #358 5 05 os-services.com	uired materials			
Recommendation of the Commit	•	Approved w/ Conditions;	Denied			
Comments/Conditions/Other:						

OFFICE USE ONLY

APPROVAL LETTER SENT:

ACKNOWLEDGEMENT LETTER:

DATE RECEIVED:

APPROVAL DATE: