



Design Review Request

Please complete and submit to MDM via email, fax, or mail in footer.

Date: _____

Property Address: _____

Owner's Name(s): _____

Home Phone: _____ Other Phone: _____

Email address: _____

The following request is being made:

Please be specific. Supply a diagram/map of your plan indicating location and description of item(s) requested, color samples, pictures, etc. if applicable.

Estimated Start Date: _____ Estimated Completion Date: _____

I understand that I must receive approval of the DRC in order to proceed. I understand the DRC approval does not constitute approval of the local building department and that I may be required to obtain a building permit. I agree to complete Improvements promptly and per the specifications approved or my approval may be withdrawn.

Owner's Signature

Date

(For LRMD use only)

The decision of the committee shall be made within 14 days after receipt by the committee of all materials required unless such time period is extended by mutual agreement.

- Your request has been: _____ Approved
 _____ Approved with conditions below
 _____ Disapproved – Additional information required
 _____ Disapproved

Comments: _____

Lorson Ranch Metropolitan District Design Review Committee, by

Committee Member Signature

Date