

APPLICATION FOR DESIGN REVIEW

Submit to:

Architectural Review Committee  
Sunnyside Ranch Estates Property Owners Association  
PO Box 198  
Southwick, MA 01077

**PLANS WILL NOT BE ACCEPTED FOR REVIEW WITHOUT A COMPLETED APPLICATION**

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**Name & Address of Property Owner:**

\_\_\_\_\_  
\_\_\_\_\_

Phone : \_\_\_\_\_

Cell Phone: \_\_\_\_\_

**Type of Construction:**

\_\_\_\_ Shed / Fence

\_\_\_\_ Deck / Patio / Porch

\_\_\_\_ Pool & Fencing

\_\_\_\_ Landscape Design Changes

\_\_\_\_ Addition / Garage

\_\_\_\_ Change of Siding / Stain / Re-Roof

**Name & Address of Architect:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Contact Person:

\_\_\_\_\_

Phone:

\_\_\_\_\_

Cell Phone:

\_\_\_\_\_

Signature of Home Owners:

\_\_\_\_\_

**Name and Address of Contractor:**

\_\_\_\_\_  
\_\_\_\_\_

License #: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Contact Person:

\_\_\_\_\_

Phone:

\_\_\_\_\_

Cell Phone:

\_\_\_\_\_

Signature of Contractor:

\_\_\_\_\_

**Reason for application:**

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**Construction of:** \_\_\_\_\_

**Location on Property:**

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**Dimensions of Above Addition:**

Length: \_\_\_\_\_

Width: \_\_\_\_\_

Depth: \_\_\_\_\_

**Materials:** \_\_\_\_\_

Shingles: \_\_\_\_\_

Siding: \_\_\_\_\_

Color : \_\_\_\_\_

Pavers or stone: \_\_\_\_\_

Retaining Wall Blocks: \_\_\_\_\_

Will the project be completed in its entirety in a direct and unified manner or will the project be completed in several Phases.

IF project completion will be done in several phases, please break down the phases for completion below.

Phase 1: \_\_\_\_\_

Phase 2: \_\_\_\_\_

Phase 3: \_\_\_\_\_

Please provide any additional information necessary:

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By Submitting this application for Design Review we understand there is no guarantee the Committee will grant full approval of our project. We agree to work with the Committee to provide any additional information necessary to assist the Committee in making their final decision regarding our project. We agree that we will work with the Committee to consider recommended changes that might be necessary for our project.

Initial: \_\_\_\_\_ Initial: \_\_\_\_\_

IF, our project will involve several intervals we agree that the steps will be defined and completed in a timely process

**Home Owner Signatures:**

\_\_\_\_\_, \_\_\_\_\_

The inclusion of Photographs of proposed materials with your application will assist the committee in their review of your project.

**ARC Review Approval and Dates:**

Preliminary Review : \_\_\_\_\_ Date: \_\_\_\_\_

Final Review: \_\_\_\_\_ Date: \_\_\_\_\_

Exterior Finishes: \_\_\_\_\_ Date: \_\_\_\_\_

Landscape: \_\_\_\_\_ Date: \_\_\_\_\_

Additional: \_\_\_\_\_ Date: \_\_\_\_\_

**ARC Committee:**

Member: \_\_\_\_\_ Date: \_\_\_\_\_

Member: \_\_\_\_\_ Date: \_\_\_\_\_

ARC Chairperson: \_\_\_\_\_ Date: \_\_\_\_\_