

# MEADOW MOUNTAIN HOA

C/O Flagstaff Management, Inc.  
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## DESIGN REVIEW REQUEST

HOMEOWNER \_\_\_\_\_

HOME PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_

WORK PHONE \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_ E-Mail Address \_\_\_\_\_

### PLEASE INDICATE THE TYPE OF IMPROVEMENT THAT YOU ARE REQUESTING.

- |   |  |
|---|--|
| <input type="checkbox"/> Painting             | <input type="checkbox"/> Deck/Patio Slab |
| <input type="checkbox"/> Landscaping          | <input type="checkbox"/> Patio Cover     |
| <input type="checkbox"/> Fencing              | <input type="checkbox"/> Roofing         |
| <input type="checkbox"/> Drive/Walk Addition  | <input type="checkbox"/> Room Addition   |
| <input type="checkbox"/> Basketball Backboard | <input type="checkbox"/> Other           |

Please describe the improvements that you are requesting (attach additional documentation as needed.)

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I understand that I must obtain approval of the Association before I commence any improvements. I understand that Association approval does not relieve me of my responsibility to obtain building permits from the City of Longmont, if required. I understand that my improvements must be completed per specifications or approval is withdrawn.

Homeowner \_\_\_\_\_ Date \_\_\_\_\_ Projected Completion Date \_\_\_\_\_  
Signature

### Architectural Review Committee Action:

- Approved as submitted  
 Approved with the following Changes.  
 Disapproved
- Must be completed by: \_\_\_\_\_

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Architectural Review Committee \_\_\_\_\_ Date \_\_\_\_\_  
Signature