



**SUMMERLIN
NORTH
Community Association**

Improvement Request

NAME _____ DATE OF APPLICATION _____

PROPERTY ADDRESS _____ ZIP _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

BUSINESS PHONE _____ HOME PHONE _____ EMAIL _____

SUBDIVISION NAME _____

I WOULD LIKE TO REQUEST APPROVAL FOR THE FOLLOWING EXTERIOR CHANGES:

(TYPE OF IMPROVEMENT AS PER ATTACHED DRAWING)

HOMEOWNERS SIGNATURE _____ DATE _____

NEIGHBOR APPROVAL: (Required only for property line and/or wall improvements and modifications) All impacted owners must sign.

NEIGHBOR'S SIGNATURE _____ DATE _____

NEIGHBOR'S SIGNATURE _____ DATE _____

NEIGHBOR'S SIGNATURE _____ DATE _____

MAIL TO:

Summerlin North Community Association
Design Review Committee
2120 Snow Trail
Las Vegas NV 89134
838-5500 FAX 256-2585