



SUMMERLIN WEST

COMMUNITY ASSOCIATION

Improvement Request

NAME _____ DATE OF APPLICATION _____

PROPERTY ADDRESS _____ ZIP _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

BUSINESS PHONE _____ HOME PHONE _____

SUBDIVISION NAME _____ GATE CODE _____

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

(TYPE OF IMPROVEMENT AS PER ATTACHED DRAWING)

HOMEOWNERS SIGNATURE _____ DATE _____

NEIGHBOR ACKNOWLEDGEMENT: (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 West Association Management
Design Review Committee
1980 Festival Plaza Drive, Suite 340
Las Vegas, NV 89135
TEL (702) 791-4600 FAX (702) 791-4660
Email: SummerlinAssociationManagement
@howardhughes.com