

Sketch Design Review Application

FORM A

Property Information:	
Street Address:	
Lot Phase	
Owner Information:	
Name:	
Mailing Address:	
Telephone:	FAX:
Email:	
Architect Information:	
Name:	
Mailing Address:	
Telephone:	
Email:	
Builder Information:	
Name:	
Mailing Address:	
Telephone:	
Email:	
Landscape Designer Information:	
Name:	
Mailing Address:	
Telephone:	
Fmail:	

Form A 1

Information:

1. Are any varia application?	ances from Starling Community Design Manual being requested under this
0	Yes
0	No
If yes, please de	escribe the variance:
2. Items submitt	ed (please check):
0	Review Fee (Checks payable to Starling Community Association, Inc.)
0	Site Plan
0	Floor Plans
0	Roof Plan
0	Elevations
0	Landscape Plan
0	Digital copy (PDF) of all of the above

Form A 2



Acknowledgement Statement

The Lot Owner acknowledges that he/she has received, read, and will abide by the Starling Community Design Guidelines Manual.

As stated in both the Covenants and Design Manual, violations will be remedied by the Starling Community Homeowner's Association whereupon the Lot Owner will be responsible for the cost of the remedy.

I (We)		am/are the Owner(s) of
record of Lot,	Phase,	of the Starling Community.
The physical address is		-
I/We have read these requirer	nents and understand their in	mplication. Furthermore, I (We)
have been given sufficient oppo	ortunity to discuss any questio	ns we may have regarding these
requirements with a member	of the Starling Community D	esign Review Panel. My (Our)
signatures(s) below is / are evi	idence of my/our intent to con	nply with these requirements.
Owner Signature:		Date:
Printed Name:		
Timed Name.		
Applicant Signature:		Date:
, applicant orginatoro.		
Printed Name:		

Form A 3



Construction Design Review Application

FORM B

Property Information:	
Street Address:	
Lot Phase	
Owner Information:	
Name:	
Mailing Address:	
Telephone:	
Email:	
Architect Information:	
Name:	
Mailing Address:	
Telephone:	
Email:	
Builder Information:	
Name:	
Mailing Address:	
Telephone:	FAX:
Email:	
Landscape Designer Information:	
Name:	
Mailing Address:	
Telephone:	
Email:	

Form B 1

Information:

1. Are any varia application?	inces from Starling Community Design Manual being requested under this
0	Yes
0	No
If y	ves, please describe the variance:
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_	
2. Items submitt	ed (please check):
0	Site/Grading Plan
0	Floor Plans
0	Roof Plan
0	Elevations & Sections
0	Samples & Cut Sheets
	O Exterior Paint Colors (On Labeled Elevations)
	O Selections & Colors of Metal Roofing & Siding, & Wood Siding (On
	Labeled Elevations)
0	Rendered Elevation
0	Landscape Plan
0	Digital copy (PDF) of all of the above
Signature:	Date:

Form B 2



Changes Application

FORM C

Property Information:	
Street Address:	
Lot Phase	
Ourner Information	
Owner Information:	
Name:	
Mailing Address:	
Telephone:	FAX:
Email:	
Architect Information:	
Name:	
Mailing Address:	
Telephone:	FAX:
Email:	
Builder Information:	
Name:	
Mailing Address:	
Telephone:	
Email:	
Landscape Designer Information:	
Name:	
Mailing Address:	
Telephone:	
Email:	

Form C 1

Information:

i. Has the re	equested change or modification already been constructed?
	O Yes
	O No
	If yes, please explain:
2. Change De	escription and reason for change:
•	fic drawings of proposed change)
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3. Items subn	nitted (please check):
	O Review Fee (Checks payable to Starling Community Association, Inc.)
	O Plans/Elevation
	O Details/ Samples
	O Digital copy (PDF) of all of the above
Signatura	Data
Signature:	Date:
Printed Name	o:

Form C 2