

## MODIFICATION REQUEST

## **Covenant Commission**

Date:	Parcel:	Lot:
Property Address:		
Owner:Address:		
Phone: Fax: E-mail:	Phone: Fax: E-mail:	
Submittal Fee \$	payable to <i>DC Ranch Covenant Commi</i> . ev. 1/1/20)	ssion
Supporting Documents attached (ch	neck all that apply):	
☐ Drawings (2 copies, 11"x17" max size)☐ Plans & Elevations	<ul><li>☐ Product Samples with Specifications</li><li>☐ Color Samples with Specifications</li></ul>	☐ Photos of areas to be modified
	dded by this modification:	Please allow 30 days for review
Describe proposed modifications in	detail:	

Prior sub-association approval is required if you live in Parcels 2.4, 2.7, 4.2, 4.11, 1.12, 1.15, 1.16, 2.8, and T5. Improvements may require permits from the City of Scottsdale building and/or zoning departments, 480-994-2500.