



**RIVER VALLEY RANCH**  
**MASTER ASSOCIATION**  
**444 RIVER VALLEY RANCH DRIVE**  
**CARBONDALE, COLORADO 81623**

**Renovation Permit Application**

Owner: \_\_\_\_\_ Address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Lot #: \_\_\_\_\_

Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Yard Work – Requires Site Plan. Proposed Work is  NEW  ADDITIONAL  REMOVAL  REPLACEMENT

- |  |                                     |  |   |
|--|-------------------------------------|--|---|
| <input type="checkbox"/> Landscape (all types) | <input type="checkbox"/> Fencing    | <input type="checkbox"/> Irrigation      | <input type="checkbox"/> Tree           |
| <input type="checkbox"/> Deck                  | <input type="checkbox"/> Walk Path  | <input type="checkbox"/> Driveway        | <input type="checkbox"/> Trash Dumpster |
| <input type="checkbox"/> Yard Decorations      | <input type="checkbox"/> Art        | <input type="checkbox"/> Outdoor Kitchen | <input type="checkbox"/> BBQ            |
| <input type="checkbox"/> Play Equipment        | <input type="checkbox"/> Trampoline | <input type="checkbox"/> Basketball Hoop | <input type="checkbox"/> Swing Set      |
| <input type="checkbox"/> Pool                  | <input type="checkbox"/> Hot Tub    | <input type="checkbox"/> Firepit         | <input type="checkbox"/> Patio          |
| <input type="checkbox"/> Other _____           |                                     |  |   |

Home Work – Requires Elevation Plan.  NEW  ADDITIONAL  REMOVAL  REPLACEMENT

- |                                      |   |   |                                   |
|--------------------------------------|---|---|-----------------------------------|
| <input type="checkbox"/> Painting    | <input type="checkbox"/> Staining                               | <input type="checkbox"/> Roofing          | <input type="checkbox"/> Window   |
| <input type="checkbox"/> Venting     | <input type="checkbox"/> Radon                                  | <input type="checkbox"/> Air Conditioning | <input type="checkbox"/> Lighting |
| <input type="checkbox"/> Antennae    | <input type="checkbox"/> Out Building (requires site plan also) |   |                                   |
| <input type="checkbox"/> Other _____ |   |   |                                   |

**Required Submittal Items**

- Site plan showing locations for proposed work. Elevation plans for penetrations in walls or roofs.
- Manufacturers specifications including color pictures and dimensions. Samples may be required.
- Pictures of existing conditions.
- Expected start date \_\_\_\_/\_\_\_\_/\_\_\_\_ completion date \_\_\_\_/\_\_\_\_/\_\_\_\_

I accept and acknowledge that all guidelines of the RVRMA Design Review Committee must be followed and may require additional submittal information before approval is granted. At the discretion of the RVRMA General Manager or Community Service Manager this application may be referred to the Design Review Committee for review and final approval.

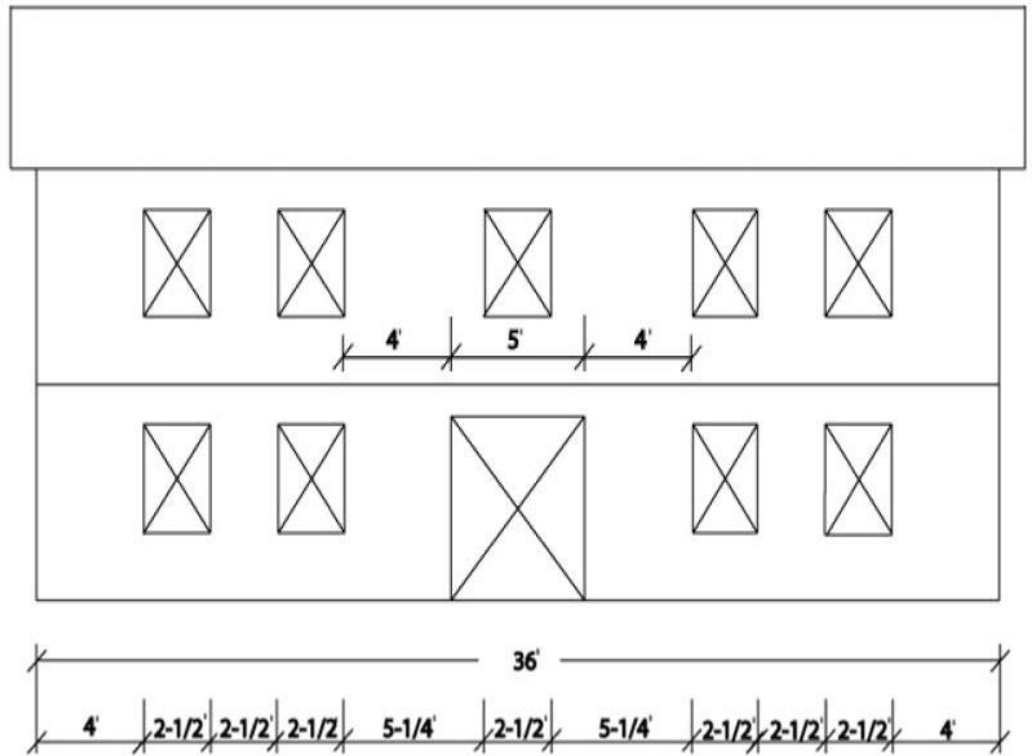
Authorized Agent \_\_\_\_\_ Date \_\_\_\_\_

<input type="checkbox"/> Administrative Review	<input type="checkbox"/> DRC Review Required	
_____ Administrative Review	_____ \$25.00	
_____ DRC Review	\$137.50 / 15 min.	_____
_____ Site Visits Required	\$ 75.00 / Each	_____
_____ Permit Fee	<b>TOTAL:</b>	_____

## Plan Samples

- 1) Produce correctly dimensioned sketch or edit a photo showing location of proposed work.
- 2) Submit plans on 8½ x 11 or larger format, one sided.

## ELEVATION SAMPLE



## SITE PLAN SAMPLE

