



PO Box 51078

timbersmthoa@gmail.com

Billings, MT 59105

www.timbersmt.com

DESIGN REVIEW APPLICATION: NEW CONSTRUCTION

THIS APPLICATION CAN BE USED FOR ANY SINGLE-FAMILY NEW CONSTRUCTION

Required checklist for a new construction application

Applications are not considered complete and will not be reviewed by the design committee until each checklist item below has been submitted by the landowner.

Please email an electronic version of the entire application to timersmthoa@gmail.com and mail any items indicated to PO Box 51078, Billings, MT 59105.

- Application form for new construction (attached) completed and signed. Hard copy required
- Site plan to scale (indicate scale and North arrow shown)
 - Accurate setbacks drawn to scale (including any easements) with structure location
 - Distances between any detached structures
- "Builder Set" Hard copy of the "Builder Set" in an 11x17 required
 - Elevations – Front, sides, and rear
 - Exterior dimensions (primary and detached structures)
- Exterior color scheme with paint colors
- Drainage plan for the lot Hard copy required
- Landscape site plan (can be submitted later with an additional \$75 fee)
- Fence design (only black iron fence is allowed per covenants), height, and location on property
- Photo examples of design, materials and colors
- \$250 Design review fee paid to Tail Wind Management. Mail check to 525 St Johns Ave, Billings, MT 59101. Please indicate Timbers Subdivision & lot number on the check

_____ Initial if all the above items are complete and are included in the application submission

All approvals are valid for 18 months. If your approval expires before your modification is completed, you will need to submit for an extension or re-submit your application



Notification of the Design Review Committee's decision will be given to the landowner within 30 business days after receipt of all required information

Owner Information

Date:

Name:

Phone:

Email:

Mailing Address:

Architect/Draftsman:

Email:

Phone:

Contractor:

Phone:

Email:

Projected Start Date: (Month/Day/Year):

Completion Date:

Who will be performing the work? Contractor Homeowner

Filing & Lot #:

Timbers Address:

Main floor square footage (excluding patios):

Total square footage under roof (excluding patios):

Requested approval (check all that apply)

- Home
- Fence
- Landscaping
- Detached Structure
- Other _____





Submittal Acknowledgement

The submittal of this application does not constitute approval of the proposed plan. Written notification of the Design Review Committee's decision will be supplied to the Landowner within 30 business days after receipt of all required information.

Construction must not begin until the Committee has approved the plans in writing. As the Landowner, I have read and understand Timbers Design Guidelines, and applicable Governing Documents.

As Landowner, I acknowledge that the persons reviewing the plans and specifications will change from time to time and that opinions on aesthetic matters, as well as interpretation and application of these guidelines, may vary accordingly.

In addition, I acknowledge that it may not always be possible to identify objectionable features of construction until completed, in which case it may be unreasonable to require changes to the improvements involved.

However, the Committee may refuse to approve similar proposals in the future. Approval of application shall not constitute an approval, ratification or endorsement of the quality or architectural or engineering soundness of the proposed improvements and neither the Committee nor the Board shall have any liability for any defects in the plans, specification or improvements. I agree to pay any costs incurred by the Association if I fail to meet the standards established by the Committee and the Board of Directors.

Homeowner's Signature

Print Name

I hereby certify that all modifications will be installed as approved by the Design Review Committee. _____ Initials

I understand this application is not complete until I meet with an Association staff member. _____ Initials



COMPLETED BY ASSOCIATION

ACTION TAKEN BY COMMITTEE

Project:

- Approved (Request submitted is approved)
- Approved as Noted (Application conditionally approved subject to noted conditions)
- Not Approved - Additional Info Needed (Resubmit application with additional information or acceptable revisions. No work may commence until application receives final approval.)
- Not Approved (The entire request is not approved and no work may not commence)

COMMENTS:

- Check if attaching additional comments or conditions.

Received By:

Date:

Reviewed By:

Date: