HOME IMPROVEMENT REQUEST FORM HOA

UNIT BLOCK LOT

RETURN FORM TO:

Inwood Place HOA PMB 563 Suite 111 8235 Agora Parkway Selma, TX 78154

TO PROTECT OWNERS' RIGHTS AND VALUES, IT IS REQUIRED THAT ANY OWNER OR GROUP OF OWNERS WHO ARE CONSIDERING IMPROVEMENT TO THEIR DEEDED PROPERTY, TO INCLUDE LANDSCAPING, SUBMIT A REQUEST FOR APPROVAL TO THE ARCHITECTURAL CONTROL COMMITTEE FOR APPROVAL 30 DAYS PRIOR TO INITIATING WORK ON PLANNED IMPROVEMENTS. IF ANY CHANGE IS TO BE MADE, WITHOUT APPROVAL, THE COMMITTEE HAS THE RIGHT TO ORDER THE OWNER TO REMOVE THE IMPROVEMENT FROM HIS/HER PROPERTY. BE SURE TO COMPLETE THIS FORM IN DETAIL.

OWNER'S NAME	HOME PHONE	
ADDRESS OF PROPERTY	WORK PHONE	
BRIEFLY DESCRIBE THE IMPROVEMENT WHICH YOU PROPOSE:		

WHO WILL DO THE ACTUAL WORK ON THIS IMPROVEMENT

LOCATION OF IMPROVEMENT (CHECK ACTUAL AREA THAT APPLIES)
FRONT OF HOUSEBACK OF HOUSESIDE OF HOUSE
ROOF OF HOUSEGARAGEPATIO
OTHER (DESCRIBE)
MATERIAL TO BE USED FOR THE IMPROVEMENT (CHECK APPLICABLE ITEMS)
BRICK - COLOR CEMENT STUCCO
WOOD- COLOR NATURAL ELECTRICAL
SIDING- COLOR ALUMINUM FENCING (TYPE)
STAIN - COLOR OTHER (EXPLAIN)

I UNDERSTAND THAT THE RESIDENTIAL REVIEW BOARD WILL ACT ON THIS REQUEST AS QUICKLY AS POSSIBLE AND CONTACT ME IN WRITING REGARDING ITS DECISION. I AGREE NOT TO BEGIN PROPERTY IMPROVEMENT WITHOUT WRITTEN APPROVAL FROM THE ARCHITECTURAL CONTROL COMMITTEE.

OWNER'S SIGNATURE

CONSTRUCTION START-UP DATE

DATE RECEIVED BY ASSOCIATION ESTIMATED COMPLETION DATE

___(1) THIS COMPLETED FORM.

- ___(2) COMPLETED DETAILED BUILDING PLANS, MATERIALS LISTING AND SPECIFICATIONS
- __ (3) A SITE PLAN SHOWING THE LOCATION OF THE PROPOSED IMPROVEMENT (S).

APPROVED BY	TITLE	DATE	
DENIED BY	TITLE	DATE	
COMMENTS:			