OUAIL GREEN WEST

REQUEST FOR HOME IMPROVEMENT APPROVAL MASC AUSTIN PROPERTIES, INC.

945 ELDRIDGE ROAD * SUGAR LAND, TX 77478 * TELEPHONE: 713-776-1771 * FAX: 713-776-1777

In an effort to provide and protect each individual homeowner's rights and values, it is required that any homeowner considering improvements (examples: exterior painting, patio covers, outside buildings, fences, decks, basketball goal, etc.) of their deeded property, submit a Request for Home Improvement Approval to the Architectural Control Committee for approval of the Homeowner's Association prior to initiating work on planned improvements. If any change is made that has not been approved, the committee has the right to ask the homeowner to remove the improvement from the property.

Please fill out this form in complete detail, sign, and return to the above address. _____ Property Address ___ Owner's Name Mailing Address (if different) ______ Home Phone _____ Work Phone _____ Email Address: _____ Who will do the actual work on this improvement? Additional Items Required (as appropriate): A Photocopy of your lot survey (issued at closing) or a hand drawing, showing the location and size of the improvement. 1. Paint and/or stain color samples. 2. 3. Plan and elevation drawings of improvements specifying dimensions and construction materials. Manufacturers' brochures when available. 4. 5. Please consider sending photographs to illustrate existing or unusual conditions. Notes: Only muted paint colors are allowed such as grays, browns, and beige, but these can be slightly tinted with other colors. 1. Any improvement over six feet tall placed in the backyard (such as storage sheds, swing sets, gazebos, etc.) must not extend 2. past the left or right side walls of the house in order to severely reduce its visibility from the front street. Detailed improvement description: Location of Improvement (attach a plot survey or sketch of location on property): Dimensions of improvement (including height): Colors of house presently (must be completed): Paint: ______ Brick: _____ Roof: _____ State color to be used in the following areas (if they apply): _____ Trim: ____ (soffit, fascia boards, exterior doors and window trim) (main wooden portion of the house and exterior doors) If replacing the roof, please fill out the following: Manufacture's name of material: ______ Weight of the roofing material: _____ Manufacture's color name: Other: I understand that the Architectural Control Committee (ACC) has up to thirty (30) days but will act upon this request as quickly as possible and contact me regarding their decision(s). I agree not to begin property changes or improvements until the ACC informs me of their approval. Start Date **Completion Date** Signature of Homeowner MASC Austin Properties, Inc., 945 Eldridge Road, Sugar Land, TX 77478 Submit to: ARCHITECTURAL CONTROL COMMITTEE USE ONLY

ACC Signature: ______ Date: ______ (circle) APPROVED/DENIED

Comments: