

In accordance with the governing documents of your Association, all exterior improvements and/or changes from the original construction must be submitted for and approved by the Architectural Control Committee. Failure to receive approval may result in fines, removal, alteration of the improvement. You should be notified within 15 days. If not, contact Sterling ASI.

Please complete the application below in its entirety and return to:

Sterling Association Services, Inc.
P O Box 38113
Houston TX 77238-8113
Attn: WWL Improvement Application

Phone: 832.678.4500
Fax: 832.604.7093
Email: servicedesk@sterlingasi.com

This pdf is a form that can be filled out and saved by using Adobe Acrobat.

Property Address: _____

Name: _____

Phone Number(s): _____

Email: _____

Mailing Address (if different): _____

Check one or more items of the following:

- | | | |
|---|---|---|
| <input type="checkbox"/> Exterior Lighting | <input type="checkbox"/> Siding | <input type="checkbox"/> Solar Film, Screens |
| <input type="checkbox"/> Small Satellite Dishes | <input type="checkbox"/> Decks | <input type="checkbox"/> Storm/Screen Doors |
| <input type="checkbox"/> Room Additions/Conversions | <input type="checkbox"/> Swimming Pools | <input type="checkbox"/> Window Treatments and Displays |
| <input type="checkbox"/> Sunrooms | <input type="checkbox"/> Spa/Jacuzzi | <input type="checkbox"/> Outdoor Carpeting |
| <input type="checkbox"/> Outbuildings | <input type="checkbox"/> Children's Play Apparatus
or Structures | <input type="checkbox"/> Flag Poles |
| <input type="checkbox"/> Patio Covers | <input type="checkbox"/> Basketball Goals | <input type="checkbox"/> Rainwater Recovery Systems |
| <input type="checkbox"/> Awnings | <input type="checkbox"/> Window Replacement | <input type="checkbox"/> Driveway Gates |
| <input type="checkbox"/> Arbors | | <input type="checkbox"/> OTHER exterior modification |

Describe **OTHER** exterior modification _____

Important information regarding these improvements/modifications can be found in the Architectural Guidelines and Deed Restrictions found on the Woodwind Lakes web site.

If applicable, fill out the following information. Paint colors can be chosen from the approved list found on the Woodwind Lakes web site and must match the home. Roof shingles must match the home and be from the approved list on the Roof application.

PAINT: Base Color _____ Manufacturer _____ Manufacturer's Number _____

ROOF: Manufacturer (ex.: Certainteed) _____ Name of Product (ex.: Landmark) _____

Color: (ex.: Weathered Wood) _____

Owner's Signature: _____ Date: _____