Leawood Colony HOA, Inc. 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.

Owner's Name		Property Address		
Mailing Address (if different)		Home Phone		
Work Phone	Cell Phone	Email Address:		
Who will do the actual work on this improvement?				

Additional Items Required (as appropriate):

- 1. A Photocopy of your lot survey (issued at closing) or a hand drawing, showing the location and size of the improvement.
- 2. Paint and/or stain color samples.
- 3. Plan and elevation drawings of improvements specifying dimensions and construction materials.
- 4. Manufacturers' brochures when available.
- 5. Please consider sending photographs to illustrate existing or unusual conditions.

Notes:

- 1. Only muted paint colors are allowed such as grays, browns, and beige, but these can be slightly tinted with other colors.
- 2. Any improvement over six feet tall placed in the backyard (such as storage sheds, swing sets, gazebos, etc.) must not extend past the left or right side walls of the house in order to severely reduce its visibility from the front street.

Detailed improvement	it description:
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Location of Im	provement (attach a plot survey or sketch of location of	n property):	
Dimensions of	improvement (including height):		
Colors of hous	e presently (must be completed):		
	Brick:	Roof:	
	be used in the following areas (if they apply): Trir	n:	
(main woo	oden portion of the house and exterior doors)	(soffit, fascia b	oards, exterior doors and window trim)
If replacing th	ne roof, please fill out the following:		
		Weight of the roofing material:	
Manufacture's color name:		Other:	
	that the Architectural Control Committee (ACC) has contact me regarding their decision(s). I agree not to val.		
	Signature of Homeowner	Start Date	Completion Date
Submit to:	MASC Austin Properties, Inc., 945 Eldridge Ro	oad, Sugar Land, TX	.77478

ARCHITECTURAL CONTROL COMMITTEE USE ONLY					
ACC Signature:	Date:	(circle) APPROVED/DENIED			
Comments:					