**Homeowner's Name(s): Property Address:**

**Telephone Numbers: home - cell - work -**

**Email address:**

**Project dates (estimate): start: end:**

**Is a building permit required by the city? If so, do you have it yet? Permit #:**

*This is a generic form used by many associations. It is designed to get the most information possible about your planned addition. Each HOA’s ACC guidelines are different. Options listed are not approved by all HOAs.*

|  |
| --- |
| **BUILDINGS: I want to add a building or structure to my back yard**□ **Patio Cover** connected to my house and covering the patio:  **The dimensions will be:** **height - width- depth - Total sq.ft.-** **The roof will be:** \_\_\_\_\_ shingled to match the shingles on my house \_\_\_\_\_ slatted, pergola type shade structure \_\_\_\_\_ other roofing (describe) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **The posts will be:** \_\_\_\_\_ wood \_\_\_\_ metal The color will be: □ **Storage building**: *You must attach a sketch of your plan or a photo of the kit you plan to buy. If you are installing a prefabricated structure such as “Tuff Shed” please copy in a link to the manufacturer’s or retailer’s website showing the product design and color.* \_\_\_\_ In my fenced in back yard \_\_\_\_ In an unfenced area of my yard  **The dimensions will be:** **height - width- depth - Total sq.ft.-** **The exterior walls will be:** \_\_\_\_ wood painted to match the color of my house \_\_\_\_ metal or plastic that comes in the ready to assemble kit The color will be: **The roof type will be:** \_\_\_\_\_ shingles that will match the ones on my house \_\_\_\_\_ metal or plastic that comes in the ready to assemble kit The building will be taller than my fence: \_\_\_\_ no \_\_\_\_ yes - \_\_\_\_\_\_\_ # of ft. taller. If it will be more than two feet taller than your fence, would you be willing to get an 8’ fence? \_\_\_\_ yes \_\_\_\_ no□ **Other Structure (carport, gazebo, etc.):** *If you are installing a prefabricated structure, please copy in a link to the manufacturer’s or retailer’s website showing the product design and color. You must attach a sketch of your plan or a photo of the kit you plan to buy.*  **The dimensions will be:** **height - width- depth - Total sq.ft.-** **The roof will be:** \_\_\_\_\_ shingled to match the shingles on my house \_\_\_\_\_ slatted, pergola type shade structure \_\_\_\_\_ other roofing (describe) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **The structure will be:** \_\_\_\_ wood \_\_\_\_ metal **The color will be**:  |

I have completed this modification request in good faith and it accurately represents the alteration I propose to make. I understand that approval of this application does not authorize me to violate any provisions of the Declaration of Covenants, Conditions, and Restrictions (DCCRs) for my Homeowners Association. I certify that all information and all materials submitted with this request are complete, true and correct. I understand and agree that no work may be performed prior to or in deviation from the terms of the written approval provided by the Architectural Control Committee (ACC) or Board of Directors of the Association.

**Electronic Signature:**

Your “electronic signature” is your name, property address, and email address typed in the fields below.

**Homeowner's Name: Property Address:**

**Homeowner’s Email Address:** **Date:**

**Return ACC form by regular US Mail, Fax, or E-Mail to:**

Homeowner Association c/o Village Association Management, LLC

P.O. Box 460057 Garland, TX 75040

Email:mks@villagemgmt.com

Fax: 1-877-568-9199

**To submit color samples, materials samples and/or additional sketches:**

* Mail them with this form, or
* Scan them and attach them to the email message when you send this form, or
* Email a link from the retailer’s or manufacturer’s website showing the product and color.

**This section for Architectural Control Committee (Board of Directors) use only**

|  |  |  |  |
| --- | --- | --- | --- |
| Committee / Board Member Name:  | *Date Received \_\_\_\_\_\_\_\_\_\_\_\_\_\_* | ***Approved \_\_\_\_\_\_\_*** | ***Denied \_\_\_\_\_\_\_*** |
| Comments / Stipulations / Additional Information Required: |
| Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_ |
| Committee / Board Member Name:  | *Date Received \_\_\_\_\_\_\_\_\_\_\_\_\_\_* | ***Approved \_\_\_\_\_\_\_*** | ***Denied \_\_\_\_\_\_\_*** |
| Comments / Stipulations / Additional Information Required: |
| Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_ |

**Final Inspection performed by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_**

**This completed project \_\_\_\_ does \_\_\_\_ does not comply with the approved plan.**