FAILURE TO SUBMIT ALL REQUIRED INFORMATION CAN RESULT IN THE APPLICATION BEING RETURNED DENIED UNTIL ALL INFORMATION IS PROVIDED. EVERY EFFORT WILL BE MADE TO NOTIFY APPLICANT OF ANY LACKING INFORMATION. THE ARCHITECTURAL CONTROL COMMITTEE WILL REVIEW EACH SUBMITTED AS QUICKLY AS POSSIBLE UPON RECEIPT OF ALL REQUIRED INFORMATION.

1) If you are applying for a structure (PATIO COVER, ARBOR, STORAGE SHED, ETC.) you must submit plan and elevation drawings showing how the structure will look. Indicate size, overall height, color, materials and roofing. Copy of any permits if applicable. Show placement on the Lot survey and access route to rear of property if applicable.

2) If you are applying for play structures (PLAY STRUCTURE, SWING SET, TRAMPOLINE, BASKETBALL GOAL, ETC.) you must submit a photo, brochure or drawing. Indicate size, height, color, materials, etc. and show location on Lot survey.

3) If you are applying for a POOLSPA you must submit detailed drawings of pool and indicate on Lot survey the location of pool, pool equipment and drain lines. Access to rear of property must be indicated on Lot survey.

4) If you are applying for exterior PAINTING OR SIDING submit sample(s) of paint color and location of the color such as “trim”, “body”, “shutters”, etc.; and for siding, product information from the manufacturer. Supply photo of home showing present color, brick, stone, rock, etc.

5) If you are applying for a new ROOF please submit manufacturer’s name I product name I color name / length of warranty/ specify dimensional or high definition. A color brochure or small sample may be requested if it is an uncommon manufacturer or product.

6) If you are applying for new DOORS, STORM DOORS, OR WINDOWS please provide photo or brochure of the product and explain the location on the home.

7) If you are applying for SOLAR SCREEN/FULL WINDOW TINTING please provide material data and samples and explain the location on the home.

8) If you are applying for SECURITY CAMERAS, SECURITY GATES/SECURITY BARS please submit drawing indicating design, size, color, and indicate placement on Lot survey; for cameras, show direction aimed.

9) If you are applying for DECKING/PATIO please indicate location on Lot survey, materials to be used and height of decking off adjacent ground.

10) If you are applying for CONCRETE WORK/PAVERS, ETC. (sidewalks, driveway extension, etc.) indicate location on Lot survey. Provide dimensions of improvement, dimensions from side Lot line(s), and description of materials. Provide a color brochure if applicable.

11) If you are applying for LANDSCAPING OR TREE REMOVAL/REPLACEMENT please submit a plant list indicating plant type, size at maturity and indicate placement on Lot survey.

12) If you are applying for FENCING/GATES please indicate height and materials, provide a drawing for each. Indicate location on Lot survey.

13) If you are applying for YARD DECORATIONS (birdbath, benches, statues, signs, lighting, etc.) submit photo or brochure, list dimension. Indicate location on Lot survey.

14) If you are applying for SOLAR ENERGY DEVICES, please provide a photo, description and/or brochure and indicate size, height, color, materials and show location on lot survey. If the chosen location does not comply with guidelines, please provide energy analysis for the location that is most efficient.

15) If you are applying for a FLAG POLE, please submit height, material, installation specifications, and brochure and indicate location on lot survey. Also submit the size and type of flag(s) to be flown.

16) If you are applying for a GENERATOR, you must include the generator specification sheet. Generators must be fully screened from the road right away and form any neighbors’ yard.

PLEASE FORWARD APPLICATION AND SUPPORTING INFORMATION TO INFRAMARK I.M.S.
VILLAS AT LAKEWOOD PARK COMMUNITY ASSOCIATION, INC
2002 West Grand Parkway N. Suite 100
Katy, Texas 77449
Phone (281)870-0585
modifications@inframark.com
ARCHITECTURAL CONTROL REVIEW COMMITTEE
HOME IMPROVEMENT REQUEST FORM

All improvements must be drawn to scale on a photocopy of the survey or sketches showing dimensions, lot lines and easements with photos sufficient to describe the project in detail. Please indicate how the new structure or improvement relates to the existing structure and, if possible, provide a side and rear view. In the case of new construction, please enclose two (2) sets of plans.

The architectural control review process may take 10-30 days, depending on the deed restrictions for your community. The process cannot begin until this form is completed and received by the Committee or your Managing Agent. Please carefully review the requirements for submittal below. You will receive a written notification of the decision by the committee and no interim updates will be given during the review process.

HOMEOWNER'S NAME: ________________________________________________________________

ADDRESS: ________________________________________________________________________

PHONE: __________________ EMAIL ADDRESS: _________________________________________

HOME: ___________ WORK: ___________ E-MAIL: ________________________________

Please indicate the type of improvement(s) you propose:

Roof      Fence      Storage Shed      Room Addition
Generator  Paint     Landscaping      Other

Please describe the improvement you marked above in more detail (be specific):

______________________________________________________________________________
______________________________________________________________________________

Please provide the location of the improvement(s) you propose (e.g., front of house, back of house, side of house, garage, patio, roof, etc. Be specific, showing to scale the property lines, building set back lines, easements, fences, sidewalks, patios and pools. A PLAT, SURVEY OR SKETCH TO SCALE IS REQUIRED.
Materials planned for the improvement:

- Paint Color and Type(s)
- Stain Color and Type(s)
- Lumber and Type(s)
- Brick and Type(s)
- Screen and Type(s)
- Fence and Type(s)
- Other

Note: If you are painting or staining, you must include paint/stain samples and the brand/manufacturer. Please give particular consideration to the color of the brick when making your paint selection.

- Brick Color
- House Color
- Trim Color
- Garage Door Color

Who will perform the work on this improvement? Please check one:

- Home Owner
- Contractor

If Contractor, please provide: Email

Name

Telephone

Anticipated Start Date
Anticipated Completion Date

Note: For any room additions and/or storage buildings, you must obtain a construction permit from the City and/or County within 30 days of the date of approval by the Architectural Control Committee.

In an effort to provide and protect each individual homeowner's rights and values, it is required that any homeowner or group of homeowners considering an improvement on their deeded property submit a request for approval to the Architectural Control Committee for approval prior to initiating any work. If any change is made that has not been approved, the committee has the right to ask the homeowner to remove the improvement from his or her property.

I understand that the Association's Architectural Control Committee will act on this request as quickly as possible and contact me in writing regarding their decision. I understand that no interim updates and status will be given on my application. I agree not to begin any improvement(s) until the Architectural Control Committee notifies me of their decision.

Signature: ___________________________ Date: ___________________________
This application is complete, if you have completed in detail:

1. Describing the improvements and attaching the required drawings;
2. Attach your plat, survey or sketch showing the exact location of the proposed improvements;
3. Attach a sample of the paint or stain; and,
4. Sign the application

FOR ASSOCIATION & OFFICE USE ONLY

Date Received ______________  Date Submitted to ACC/ARC ______________

Date Reviewed ______________  Approved _____________  Denied _____________

Comments Contingencies from ACC/ARC__________________________________________

ACC/ARC  Signature :___________________________________________________________
ACC/ARC  Name:_______________________________________________________________
Attested by:______________________________________________________________
PLEASE KEEP INSTRUCTIONS FOR FUTURE APPLICATIONS

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PLEASE FORWARD APPLICATION AND SUPPORTING INFORMATION TO THE CONTACT CHOICE(S) ON THE APPLICATION FORM