

**ARCHITECTURAL CONTROL COMMITTEE
IMPROVEMENT REQUEST FORM**

In accordance with the recorded covenants, conditions and restrictions of the association, and to protect each individual owner's rights and values, it is required that any owner who is considering exterior modification of his/her deeded property submit the following to the Architectural Control Committee prior to initiating work on the planned improvements:

A completed Improvement Request Form (**ONE EXTERIOR MODIFICATION PER REQUEST FORM. Multiple modifications submitted on one form will be rejected**).

Complete and detailed building plans, material listing and specifications.

A property site/survey plans showing the location of the proposed improvement.

FAILURE TO SUBMIT THE REQUESTED ATTACHMENTS (ITEMS ABOVE) PRIOR TO CONSTRUCTION MAY RESULT IN DENIAL OF YOUR REQUEST FOR IMPROVEMENT. If any change is made without approval, the Committee has the right to tell the homeowner to remove the improvement from his/her property. Any homeowner considering any exterior improvement to his/her property is urged to review the recorded deed restrictions prior to initial request.

PLEASE PRINT THE FOLLOWING INFORMATION:

Owner Name: _____
Address: _____
Home Phone: _____ Best Time to Call: _____
Email Address: _____

BRIEFLY DESCRIBE THE IMPROVEMENT THAT YOU PROPOSE:

LOCATION OF IMPROVEMENT (CHECK ACTUAL AREAS THAT APPLY):

- | | |
|--|---|
| <input type="checkbox"/> Front of dwelling _____ | <input type="checkbox"/> Back of dwelling _____ |
| <input type="checkbox"/> Side of dwelling _____ | <input type="checkbox"/> Roof of dwelling _____ |
| <input type="checkbox"/> Garage _____ | <input type="checkbox"/> Patio _____ |
| <input type="checkbox"/> Other (Describe) _____ | |

MATERIAL TO BE USED FOR THE IMPROVEMENT (CHECK APPLICABLE ITEMS):

- | | |
|--|--|
| <input type="checkbox"/> Brick (Color) _____ | <input type="checkbox"/> Cement / Stucco _____ |
| <input type="checkbox"/> Wood (Type/Color) _____ | <input type="checkbox"/> Electric _____ |
| <input type="checkbox"/> Paint (Color) _____ | <input type="checkbox"/> Stain _____ |
| <input type="checkbox"/> Other (Explain) _____ | <input type="checkbox"/> Glass _____ |

ADDITIONAL INFORMATION FOR THE IMPROVEMENT:

Applicable deed restrictions read? YES NO

Will this project require fence removal? YES NO

Will project be visible from the street? YES NO

Building permit applied for if necessary? YES NO NOT APPLICABLE

Consent is required from any adjacent properties that will be most affected and/or have a view of your proposed change. Should one of your neighbors disapprove, please indicate with the reason for their disapproval noted. Their signatures indicate an awareness of your intent and do not constitute or indicate approval or disapproval by the committee.

(Neighbor's Signature / Address / Phone Number)

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I understand that the Architectural Control Committee and the Board of Directors will act on this request within thirty (30) days of receipt and contact me in writing regarding their decision.

I agree not to begin property improvement without written approval from the Architectural Control Committee and the Board of Directors.

I understand that all construction must meet City and County code requirements, and that the Architectural Control Committee approvals do not override the City or County codes, but rather are intended to work with them.

Owner's Printed Name

Signature

Date

Owner's Printed Name

Signature

Date

Construction Start Date

Estimated Completion Date

Return this completed form and attachments
to www.townsq.io Architectural Section

(For ACC Committee Use Only)

ACC Decision: APPROVED / APPROVED WITH STIPULATIONS / DISAPPROVED / DISAPPROVED FOR MORE INFORMATION

ACC Chairperson or Representative: _____

Rationale: _____