

## ARCHITECTURAL REVIEW APPLICATION

In an effort to maintain property values, deed restrictions require that **exterior changes be approved by an Architectural Review Committee prior to commencing work**. Their evaluation addresses architectural harmony, color, location, minimum construction standards and restrictions. Please consult your deed restrictions for additional information. If your change has not been approved, the Committee will have the right to ask the homeowner to remove the improvement and/or change from the property. If you have questions on what to submit for your project, please contact our office. **COMPLETE THIS FORM IN DETAIL. IF NOT COMPLETED IT CANNOT BE PROCESSED AND WILL THUS BE RETURNED AND OR DENIED.**

Subdivision: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Owner Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Work Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Property Address: \_\_\_\_\_

Please check the improvements and/or circle the item applicable to your request. Please see the below for additional information that may be required:

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Install Storage Shed  | <input type="checkbox"/> Replace Mailbox- Detail Type | <input type="checkbox"/> Paint- Residence or Trim Only                  |
| <input type="checkbox"/> Install Pool  | <input type="checkbox"/> Install Windows/Storm Doors  | <input type="checkbox"/> Exterior Paint for Shutters/Doors/Accents      |
| <input type="checkbox"/> Replace/Install Fence   | <input type="checkbox"/> Stain Dock/Fence/Other       | <input type="checkbox"/> Room Addition/Above Garage Addition            |
| <input type="checkbox"/> Replace Garage Door   | <input type="checkbox"/> Extend Driveway/Walkway      | <input type="checkbox"/> Install Patio/Patio Cover/Pergola/Arbor/Gazebo |
| <input type="checkbox"/> Replace Front Door  | <input type="checkbox"/> Replace Roof                 | <input type="checkbox"/> Replace/Repair Siding, Wood or Brick           |
| <input type="checkbox"/> Landscaping : circle what applies - fountains, plant or remove trees, permanent flower bed structure, etc. *Backyard landscaping for a lake lot requires a survey map with location and a list of materials, plants and or trees. |   |   |
| <input type="checkbox"/> Additional Requests: (Carport, Outdoor Kitchen, BB Goal, Jungle Gym, Solar Panels, Generator, Flag Pole etc.)   |   |   |
| <input type="checkbox"/> Other: _____  |   |   |

### INSTRUCTIONS

**Please include photographs, sales literature, brochure pages, etc. Your application will be returned if samples of paint, roof information and the survey map are not attached if required for project. Only applications that do not require samples can be faxed or sent by email. Please make sure to sign the form before returning it to SCS MGMT.**

### INFORMATION REQUIRED:

1. Exterior Painting - attach **2** samples of your color choice to the back of this page in the Base & Trim area. **Note: Paint samples cannot be faxed or sent by email. Please mail or deliver by hand.**
2. Roofing Materials - Attach a small sample of shingle or color photo on the reverse side. **State manufacturer name, color of shingle and years of warranty.**
3. Submission of fence, driveway, walkway, storage shed or other structure (fort/jungle gym, satellite dish, BB goal, etc.) - draw location of improvement on **survey map** and give dimensions including height, length, width and distance from each fence; list construction materials to be used and include samples of paint and roofing materials.
4. New Construction and Room Additions – include the **survey map** with location of new construction and /or addition drawn in plus elevation and side view; show windows, doors, pitch of roof, etc. Indicate all construction materials for exterior walls and roof. **Blue Prints and Plans will not be returned.**
5. Pool requirements – submit **survey map** showing planned location of the pool. Include distance from pool decking to each fence and pump equipment location. Include approval letters from MUD District and/or County permit if they are required per your neighborhood. A monetary deposit may be required in some neighborhoods, please check before submission.

I request a response as quickly as possible but agree not to begin the project until a response is received. I understand the Committee members are not architects and do not endorse any products or services.

\_\_\_\_\_  
SIGNATURE OF HOMEOWNER

\_\_\_\_\_  
DATE

**ATTACH TWO SAMPLES OF MATERIALS HERE  
ROOF SHINGLE INFORMATION**

\_\_\_\_\_BASE COLOR

\_\_\_\_\_TRIM COLOR

**FOR COMMITTEE USE ONLY**

**SUBMISSION APPROVED**

Thank you for submitting your plans for exterior changes. Your application has been **approved** for the specified modifications. Any revisions or alterations require re-submission prior to commencement. Approval denotes compliance with the deed restrictions and carries no warranty regarding structural fitness, compliance to building codes, assurances against encroachments, etc. Once work has begun, completion must be within (30) days unless otherwise noted.

Comments: \_\_\_\_\_

**Authorized Association Representative:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Authorized Association Representative:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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**SUBMISSION DENIED**

Your application for exterior changes has been **denied**, as it does not meet guidelines as presented. Please re-assess and resubmit your plans.

- \_\_\_ a. color selection is not an approved shade
- \_\_\_ b. height or size limitations are exceeded
- \_\_\_ c. placement on lot appears to violate front set-back lines or side/rear easements
- \_\_\_ d. construction materials are not in accordance with guidelines
- \_\_\_ e. other; \_\_\_\_\_

**Authorized Association Representative:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Authorized Association Representative:** \_\_\_\_\_ **Date:** \_\_\_\_\_

\*\*\*\*\*

**ADDITIONAL INFORMATION REQUIRED**

\_\_\_ Committee requests **additional information** prior to processing your request.

Comments: \_\_\_\_\_

**Authorized Association Representative:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Authorized Association Representative:** \_\_\_\_\_ **Date:** \_\_\_\_\_

RETURN TO: **SCS Management Services, Inc., 7170 Cherry Park Drive, Houston, Texas 77095**  
**Telephone: (281) 463-1777 - Fax: (281) 463-0050 - E-mail: acc@scsmgmt.com**