Hendrick Estates Homeowners Association, Inc.

ARCHITECTURAL IMPROVEMENT APPLICATION AND REVIEW

Note: To avoid delay, make request as complete as possible or it will be returned for more information or denied as appropriate. Deed restrictions specify that approval must be obtained prior to construction.

Homeowner Name: Property Address:				
Mailing Address (if different):				
City:		State:	Zip:	
Phone:Email:				
Elliali.				
Describe Modification/Improvement/Project,		· 	·	
Has Owner review the Declaration of Covena	ants, Conditions and Restr	ictions (CC&Rs	f) for the Association?	YES / NC
Was the City of Lucas contacted regarding all project(s)?	l necessary permits for sub	oject modification	•	ES / NO
Will the modification/improvement/project be	e visible from the street in	front of the hor	me? YES / NO	
Will this modification/improvement/project r	equire the temporary remo	oval of fencing?	YES / NO	
Preferred modification/improvement/project	start date:			
Estimated modification/improvement/project	completion date:			
Name, address, phone number(s), and email a	address(es) of Contractor(s	s) performing w	ork:	
 Attach one (1) copy of contractor's p Attach one (1) copy of plat survey inc Additional landscaping must include 	dicating location of propos	sed modification	•	;

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By signing and submitting this application, I acknowledge the information provided is correct and I agree to all terms within this agreement. I understand the Architectural Control Committee (ACC) will act on this request and contact me in writing regarding their decision. I agree not to begin work on this improvement prior to receiving written approval from the Architectural Control Committee. I understand if any change is made without approval, I may be required to remove the improvement from my property at my expense. I also understand all construction must comply with the Associations' Governing Documents and all City codes. The ACC does not override any City code and approval from the ACC is not an approval from the City. Prior to any commencement of work, I agree to obtain all necessary permits from the City. I agree not to alter existing drainage patterns on my lot without approval from the City, Board or Committee. I understand approval is not a guarantee of structural safety or engineering soundness. I understand failure to comply with all items in the agreement will result in the withdrawal of approval.

Signed	Date		
Property address			
This application must be mailed or emailed	to:		
Hendrick Estates HOA Legacy Southwest Property Management 5600 Tennyson Pkwy. Ste 270 Plano, TX 75024 Voice: 214-705-1615 ext. 128 Email: Teri@Legacyswhoa.com			
(For ACC Committee Use Only) ACC Decision (circle one):			
APPROVED DISAPPROVED	DENIED PENDING MORE INFORMATION		
ACC Authorized Signature:	Date:		
Date Received by LSW:			
Date Received by ACC:			