## $\boldsymbol{ARCHITECTURAL\ CONTROL\ COMMITTEE\ (ACC)\ REQUEST\ FORM}$

DATE SUBMITTED:				
	TELE.: (	)		
	TELE.: (			
CELL #: ( )	FAX #: (			
TENANTS NAME (if tenant occupied):		/ <del></del> _		
BRIEFLY DESCRIBE THE ALTERATION OR IMPROVEM necessary):			ROPOSE (use back if	
WHO WILL PERFORM THE ACTUAL WORK ON THIS IMP	ROVEMEN	NT?		
NAME:			ST:	
Please include sketch or copy of improvement or project, includition (if applicable, use copy of your lot survey or floor plan) and its MUST SHOW DISTANCE FROM UNIT AND/OR PROPER (IMPROVEMENT)	dentify exa	ct location if	using Common Area.	
LOCATION OF IMPROVEMENT				
FRONT OF UNIT/HOUSE ROOF OF U	INIT/HOLL	<b>C</b> E	OTHER	
BACK OF UNIT/HOUSE ROOF OF C		or ·		
		P <b>C</b>		
			NNC DECDEATION	
METHOD OF SUPPORT AND/OR ANCHORAGE FOR PATION OF SUPPORT AND SUPPO			•	
EQUIPMENT, ETC.				
MATERIAL NECESSARY FOR PROPOSED IMPROVEMI PAINT COLOR(S)				
STAIN COLOR(S)				
STAIN COLOR(S) LUMBER TYPE(S)	1	TIFE		
			(S)	
BRICK TYPE(S)				
SCREEN TYPE(S) OTHER	1	TEIUNI		
If approved, I agree to build and install the improvement in accordance approval date and further agree that all maintenance, repair attachments thereto shall be performed at the expense and response	r and repla	acement of t	he improvement and	
SIGNATURE OF OWNER				
SIGNATURE OF TENANT (if applicable)				
RETURN TO:		FOR ACC U		
c/o CREATIVE MANAGEMENT COMPANY	Date rece	ived:		
ATTN:	Approved	l Denied _	Date:	
8323 Southwest Freeway, Suite 330	Ву			
Houston, Texas 77074	Comment	ts:		