

APPLICATION FOR ARCHITECTURAL CHANGE

TO: Parks of Carrollton Architectural Control Committee  
C/o Laura Gilliam  
Circle C Properties  
1004 18<sup>th</sup> Place  
Plano, TX 75074

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FROM: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

PHONE: HOME \_\_\_\_\_  
PHONE: WORK \_\_\_\_\_  
LOT NO. \_\_\_\_\_ BLOCK \_\_\_\_\_

**Directions:** (Please print or type) return to [hoacare@circlec.com](mailto:hoacare@circlec.com) or fax 866-812-8811

Please use area below to briefly describe all proposed improvements, alterations, or changes to your lot or home. Attach required detail by sketches, drawings, clippings, pictures, catalog illustrations and other data. Show location of item on your property on a copy of the survey. Application and accompanying forms must be submitted in duplicate.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signatures:

Consent is required from at least four (4) owners properties who are most affected because they are adjacent and/or have a view of your proposed change. Should one of your neighbors disapprove, please indicate with the reason for their disapproval noted in the comments section. Their signatures indicate an awareness of your intent and do not constitute or indicate approval or disapproval by the committee.

Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Lot \_\_\_\_\_  
Signature \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Lot \_\_\_\_\_  
Signature \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Lot \_\_\_\_\_  
Signature: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Lot \_\_\_\_\_  
Signature: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Lot \_\_\_\_\_  
Signature: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Lot \_\_\_\_\_  
Signature: \_\_\_\_\_

Owner's Acknowledgements:

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I understand:

1. ...that nothing herein contained shall be construed to represent that alterations to land or buildings in accordance with these plans shall not violate any of the provisions of building and zoning codes of the county to which the above property is subject. Further, nothing herein contained shall be construed as a waiver or modification of any said restrictions;
2. ...that no work on this request shall commence until written approval of the Architectural Control Committee has been received by me; the board has ninety (90) from the date of receipt to make a decision.
3. that any construction or exterior alteration undertaken by me or in my behalf before approval of this application is not allowed; if alterations are made, I may be required to return the property to its former condition at my own expense if this application is disapproved wholly or in part; and that I may be required to pay all legal expenses incurred;
4. ...that any approval is contingent upon construction or alterations being completed in a workmanlike manner;
5. ...that members of the Architectural Control Committee are permitted to make routine inspection;
6. ...that a copy of this application will be returned to me after review by the Architectural Control Committee;
7. ...that there are architectural requirements covered by the Covenants and a review board process as established by the Board of Directors.
8. ...that the alteration authority granted by this application will be revoked automatically if the alterations requested have not commenced within thirty (30) days of the approved date of this application and/or completed by any date specified by the committee;
9. ...that all proposed improvements must meet city, state and local codes. My signature indicates that these standards are met to the best of my knowledge. I understand that applications for all required building permit(s) are my responsibility;
10. ...that any variation from the original application must be resubmitted for approval.

Owner/Applicant Signature: \_\_\_\_\_  
 Date: \_\_\_\_\_  
 Co-Owner/Applicant Signature: \_\_\_\_\_  
 Date: \_\_\_\_\_

Attachments: (1) Sketch, photo, catalog illustrations, etc.  
 (2) Copy of survey marked with change being requested

FOR COMMITTEE USE ONLY: Date received: \_\_\_\_\_  
 Approved: \_\_\_\_\_ Date: \_\_\_\_\_  
 Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_  
 Comments: \_\_\_\_\_

BOARD OF DIRECTORS

Approved: \_\_\_\_\_  
 Disapproved: \_\_\_\_\_  
 Comments: \_\_\_\_\_

Drawings or Sketches: