

**NORTHCLIFFE MANOR A.C.I.A.
ARCHITECTURAL CONTROL COMMITTEE**

REQUEST FOR HOME IMPROVEMENT APPROVAL

In an effort to provide and protect each individual homeowner's rights and values, it is required that any homeowner considering improvements of their deeded property which effects the structure of a building or improvements with changes visible from other homes (examples: patio covers, outside buildings, fences), MUST submit a REQUEST FOR HOME IMPROVEMENT APPROVAL to the Architectural Control Committee for approval PRIOR to initiating work on planned improvements. If any change is made that has not been approved, the Committee has the right to ask the homeowner to remove the improvement from the property. Please fill out this form in complete detail.

OWNER'S NAME _____ HOME PHONE () _____
ADDRESS _____ WORK PHONE () _____
SUBDIVISION SECTION # _____ BLOCK _____ LOT _____
TYPE OF IMPROVEMENT _____

Describe improvement (ATTACH A COPY OF YOUR LOT SURVEY OR DRAWING TO YOUR SUBMITTAL, and PLEASE indicate the size and placement of the improvement in relationship to your property dimensions.)

LOCATION

____ FRONT OF HOUSE ____ ROOF OF HOUSE ____ GARAGE
____ BACK OF HOUSE ____ SIDE OF HOUSE ____ PATIO
____ LANDSCAPING ____ OTHER

MATERIAL (PLEASE SUBMIT COLOR SAMPLES FOR ANY PAINT COLOR CHANGES)

PAINT _____ COLOR _____ STAIN _____ COLOR _____ LUMBER _____ CEDAR _____ TREATED _____
BRICK (HAS TO MATCH EXISTING) _____ SCREEN _____ CEMENT _____ PIPE _____ ELECTRICAL _____

DIMENSIONS

HEIGHT _____ WIDTH _____ LENGTH _____

I understand that the Association Architectural Control Committee will act on this request as quickly as possible and contact me in writing regarding their decision. I agree not to begin property improvements/changes until the Architectural Control Committee notifies me of their approval.

*****FAILURE TO SUBMIT THE SURVEY AND REQUIRED INFORMATION COULD RESULT IN A TIMELY DELAY AND/OR AUTOMATIC DISAPPROVAL OF SUBMITTED PLANS*****

Signature of Homeowner

Construction Start/Complete Date

Please return completed form to: NORTHCLIFFE MANOR A.C.I.A.
128 VISION PARK BLVD #110
SHENANDOAH, TX 77384

**UNLESS OTHERWISE STATED
ALL WORK MUST BE COMPLETED
WITHIN NINETY (90) DAYS**

FOR COMMITTEE USE ONLY

APPROVAL _____

DISAPPROVAL _____

Signature of ACC Chairman

Date of Approval/Disapproval

IF APPLICATION IS DISAPPROVED, REASON WHY: _____

Signature - NCM Board Member

Signature - NCM Board Member