

ARCHITECTURAL REQUEST FORM

Request must be submitted prior to beginning construction or improvement. Please submit your application with all required documents via email to CMS.ALLISON@GMAIL.COM Once received you will receive verification of receipt. The approval process could take up to 30 days per the associations governing documents. If you have any additional questions please call.1-281-296-9775 **Failure to receive an approval or denial shall be presumed as denied.**

Association Name: CYPRESS TRAILS

Name: _____ Street Address: _____
Phone Number: _____ Email Address: _____

The inclusion of an e-mail address authorizes the Architectural Control Committee to use electronic mail for official responses to this request.

The Declaration of Covenants, Conditions and Restrictions (the "Deed Restrictions") for the CYPRESS TRAILS RESIDENTIAL COMMUNITY ASSOCIATION specifies that all improvements as defined in the Deed Restrictions must be approved in writing by the Architectural Control Committee before their improvement begins. To assist in your compliance with this restriction, complete this form and submit it with your plans and specifications for the proposed improvement.

The plans and specifications will not be considered complete without the following items:

- If Required City Building Permit (pools).
- Plot plan or survey showing the location and dimensions of all existing and proposed improvements.
- Existing and finished grades and lot drainage provisions shall be indicated.
- The structural design, exterior elevations, exterior materials, colors, textures and shapes of all improvements described.
- Estimated time frame for completion of project: _____

APPROVAL REQUESTED :

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> BASKETBALL GOAL | <input type="checkbox"/> FENCE | <input type="checkbox"/> LANDSCAPING | <input type="checkbox"/> PLAYSCAPE |
| <input type="checkbox"/> IRRIGATION SYSTEM | <input type="checkbox"/> DECK | <input type="checkbox"/> DRIVEWAY EXTENSION | <input type="checkbox"/> EXT. PAINTING |
| <input type="checkbox"/> STORAGE SHED | <input checked="" type="checkbox"/> EXT. REMODELING | <input type="checkbox"/> SPORT COURT | <input type="checkbox"/> OTHER |

DESCRIPTION OF IMPROVEMENT:

ACC COMMITTEE RECOMMENDATION:

Approved - Contingent upon the following criteria: _____ Not Approved - Based on the following criteria: _____

PROPERTY OWNER SIGNATURE: _____ DATE: _____

SUBMIT YOUR REQUEST TO: CONSOLIDATED MANAGEMENT SERVICES

128 VISION PARK BLVD. #110, SHENANDOAH ' TEXAS 77384

E-MAIL: CMS.ALLISON@GMAIL.COM—FAX (281)296-9788—PHONE (281)296-9775