

HOME IMPROVEMENT REQUEST FORM

UNIT _____ BLOCK _____ LOT _____

RETURN FORM TO:

THE OVERLOOK HOMEOWNERS ASSOCIATION, INC.
ARCHITECTURAL CONTROL COMMITTEE
7613 Tezel Rd.
San Antonio, Texas 78250
(210) 523-1320

TO PROTECT OWNERS' RIGHTS AND VALUES, IT IS REQUIRED THAT ANY OWNER OR GROUP OF OWNERS WHO ARE CONSIDERING IMPROVEMENT TO THEIR DEEDED PROPERTY, OTHER THAN MINOR LANDSCAPING, SUBMIT A REQUEST FOR APPROVAL TO THE ARCHITECTURAL CONTROL COMMITTEE FOR APPROVAL PRIOR TO INITIATING WORK ON PLANNED IMPROVEMENTS. IF ANY CHANGE IS TO BE MADE, WITHOUT APPROVAL, THE COMMITTEE HAS THE RIGHT TO ORDER THE OWNER TO REMOVE THE IMPROVEMENT FROM HIS PROPERTY. BE SURE TO COMPLETE THIS FORM IN DETAIL.

OWNER'S NAME _____ HOME PHONE _____
ADDRESS OF PROPERTY _____ WORK PHONE _____
BRIEFLY DESCRIBE THE IMPROVEMENT WHICH YOU PROPOSE: _____

WHO WILL DO THE ACTUAL WORK ON THIS IMPROVEMENT? _____

LOCATION OF IMPROVEMENT (CHECK ACTUAL AREA THAT APPLIES)
____ FRONT OF HOUSE ____ BACK OF HOUSE ____ SIDE OF HOUSE
____ ROOF OF HOUSE ____ GARAGE ____ PATIO
____ OTHER (DESCRIBE) _____

MATERIAL TO BE USED FOR THE IMPROVEMENT (CHECK APPLICABLE ITEMS)
____ BRICK - COLOR _____ ____ CEMENT ____ STUCCO
____ WOOD - COLOR _____ NATURAL ____ ____ ELECTRICAL
____ SIDING - COLOR _____ ALUMINUM ____ ____ FENCING (TYPE) _____
____ STAIN - COLOR _____ ____ OTHER (EXPLAIN) _____

I UNDERSTAND THAT THE ARCHITECTURAL CONTROL COMMITTEE WILL ACT ON THIS REQUEST AS QUICKLY AS POSSIBLE AND CONTACT ME IN WRITING REGARDING ITS DECISION. I AGREE NOT TO BEGIN PROPERTY IMPROVEMENT WITHOUT WRITTEN APPROVAL FROM THE ARCHITECTURAL CONTROL COMMITTEE.

OWNER'S SIGNATURE

CONSTRUCTION START-UP DATE

DATE RECEIVED BY ASSOCIATION

ESTIMATED COMPLETION DATE

