

# PIN OAK VILLAGE HOMEOWNERS' ASSOCIATION

C/O ACMP, INC.

16650 Pine Forest Lane, Houston, TX 77084  
PHONE: 281-855-9867 FAX: 281-855-3411

ACC Control # \_\_\_\_\_

Account # \_\_\_\_\_

## HOME IMPROVEMENT/CHANGE REQUEST FORM

In order to protect each individual homeowner's property values and privacy, it is required for any homeowner or group of owners planning improvements or changes to their deed property(ies) to submit a request for Architectural Control Committee ("ACC") approval. This request is reviewed by the ACC to ensure compliance with the Declaration of Covenants and Restrictions. If any change is made that has not been approved, the ACC has the right to ask the homeowner to remove the improvements and/or change from the property at the owner's expense.

**The Association will not be held responsible for ensuring compliance with restrictions regarding utility easements, building setbacks or codes, or other restrictions imposed by other local or state governing bodies or companies.**

**PLEASE COMPLETE THE ENTIRE FORM, if possible and as applicable.**

OWNER'S NAME \_\_\_\_\_ HM PHONE \_\_\_\_\_

PROPERTY ADDRESS \_\_\_\_\_ WK PHONE \_\_\_\_\_

MAILING ADDRESS (if different from above)

\_\_\_\_\_

### 1. Brief description of change or improvement:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ Please add attached sheet if necessary.

*Note: All applications for any new building, additions, fencing, basketball goals, etc., must include a lot plat/survey which shows the house, lot lines, and easements. In addition, plans, sketches, drawings, illustrations, photographs, dimensions, and material samples should be provided to sufficiently describe the project in detail.*

### 2. If work is to be done by someone other than the property owner, please complete if information is available (not mandatory).

Company name \_\_\_\_\_ Phone # \_\_\_\_\_

### 3. Please indicate the location(s) of the change or improvement:

\_\_\_\_ Front of house \_\_\_\_ Back of house \_\_\_\_ Side of house \_\_\_\_ Roof \_\_\_\_ Brick  
\_\_\_\_ Patio \_\_\_\_ Garage/Garage door \_\_\_\_ Other (please explain) \_\_\_\_\_

### 4. Please indicate the material(s) to be used for the change/improvement:

\_\_\_\_ PAINT\* brand/color name: \_\_\_\_\_  
\_\_\_\_ STAIN\* brand/color name: \_\_\_\_\_  
\_\_\_\_ SIDING\* material/color name: \_\_\_\_\_  
\_\_\_\_ SHINGLES\* brand/color name/life of shingle: \_\_\_\_\_  
\_\_\_\_ LUMBER describe/type: \_\_\_\_\_  
\_\_\_\_ BRICK\* brand/color name: \_\_\_\_\_  
\_\_\_\_ CEMENT \_\_\_\_\_  
\_\_\_\_ FENCING material/height/width: \_\_\_\_\_  
\_\_\_\_ OTHER \_\_\_\_\_

\*Please attach a sample showing the color to be used. **THIS REQUEST WILL NOT BE APPROVED WITHOUT SAMPLES, where samples are needed for confirmation purposes.**

**5. If painting will be done** please indicate:

Location of painting (all wood/siding, just trim) \_\_\_\_\_  
Which color will be used where/for what if more than one color will be used \_\_\_\_\_  
Brick color(s): \_\_\_\_\_

**6. Estimated start date:** \_\_\_\_\_ Completion date: \_\_\_\_\_  
Work has already been done: \_\_\_\_\_ When? \_\_\_\_\_

**I understand the ACC has up to thirty (30) days from the date of receipt of this request to review and make a decision. I agree not to begin any change/improvement until the ACC informs me of their approval.**

\_\_\_\_\_  
(Homeowner's signature)

\_\_\_\_\_  
(Date)

**PLEASE RETURN COMPLETED REQUEST TO:**

**ARNOLD ENGLAND / or Other AC Committee Member  
ACC CHAIRPERSON  
24710 VALLEYLIGHT DRIVE  
KATY, TEXAS 77494**

You may also mail to the Management Company. If mailing to the management company, their office recommends that mailed requests be sent certified mail or that you contact their office to confirm receipt of your request—ACMP, Inc., 16650 Pine Forest Lane; Houston, Texas 77084 – 281-855-9867. Such requests should also be copied to the ACC Chairperson or other ACC Member

Any inquiries regarding the **status** of your request or how to complete this form should be directed to 281-392-0684 or [agarnie@gmail.com](mailto:agarnie@gmail.com), or to any other ACC Member or to the Management Company.

**ARCHITECTURAL CONTROL COMMITTEE USE ONLY:**

SIGNATURE \_\_\_\_\_ DATE: \_\_\_\_\_ APPROVE DISAPPROVE

SIGNATURE \_\_\_\_\_ DATE: \_\_\_\_\_ APPROVE DISAPPROVE

SIGNATURE \_\_\_\_\_ DATE: \_\_\_\_\_ APPROVE DISAPPROVE

COMMENTS: \_\_\_\_\_

\_\_\_\_\_  
(Two AC Committee Member Signatures *Required.*)

**(Management Company) ACMP USE ONLY:**

DATE RECEIVED: in office \_\_\_\_\_  
from ACC \_\_\_\_\_

Date returned to homeowner for more information: \_\_\_\_\_

Date received back from homeowner: \_\_\_\_\_

NOTES: \_\_\_\_\_