

### Architectural Modification Request Form

Request must be submitted at least 30 days prior to beginning construction or improvement.

Owner Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

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

The **Declaration of Covenants, Conditions and Restrictions** (the "Deed Restrictions") for PR No2 Owners Association specifies that all improvements as defined in the Deed Restrictions must be approved in writing by the Architectural Committee before the 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:**

- A **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.
- Statements from adjacent property owners, if appropriate
- Copy of City Permits if required by City
- Estimated **time frame for completion** of project: \_\_\_\_\_

**APPROVAL REQUESTED FOR :**

- |  |  |   |                                      |
|--|--|---|--------------------------------------|
| <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"/> ROOF        |
| <input type="checkbox"/> STORAGE SHED        | <input type="checkbox"/> PERGOLA           | <input type="checkbox"/> SWIMMING POOL      | <input type="checkbox"/> PATIO COVER |
| <input type="checkbox"/> EXTERIOR REMODELING | <input type="checkbox"/> EXTERIOR PAINTING | <input type="checkbox"/> OTHER              |                                      |

**DESCRIPTION OF IMPROVEMENT**

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**Required: I (the homeowner) have reviewed the PR No 2 Owners Association architectural guidelines per the Covenant and Deed Restrictions.**

I understand that the Architectural Control Committee (ACC) will act on this request and contact me in writing within 30 days regarding their decision. I agree not to begin work on this change / alteration until written approval from the ACC has been received. I understand that if any change is made without the approval of the ACC I may be required to remove the change/alteration from my property. I understand that all work must comply with the Association governing documents, city/county/state codes. I agree to obtain any and all necessary permits required by the city/county/state to perform the change / alteration.

**ACC approval is good for 6 months. If project is not completed in 6 months owner must resubmit for ACC approval.**

**By signing below I agree to all the terms within this request form.**

Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Submit your request to

P. O. Box 702548 • Dallas, Texas 75370-2548 • Fax: 866-919-5696 • Email: PRNUM2@ciramail.com