

# Western Oaks

## Architectural Change Request Form

### RESIDENT INFORMATION

Name: _____ Last First
Street Address: _____
Phone No.: (____) _____ Alternative Phone No.: (____) _____
Email Address: _____

### DESCRIPTION OF CHANGE

Please include a detailed description of the change/s to be made, including (but not limited to): the type of building materials and finishes to be used, all relevant dimensions, the actual placement on the lot, etc. A blueprint or designer's drawing, paint samples, photographs and/or further description of change/s should be attached to this request.

Resident Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_  
NOTE: If work does not begin within 90 days from the approval date, a new request form must be submitted.

<b>ACC/Office Use Only</b> Your request will be logged in and assigned to one of the following ACC members:  Clifford Culver – 899-0517 Willie Haas – 892-6154 Jay Hartzler – 892-4920 David Hinds – 891-9535	Request No.: _____ Date Received: _____ <input type="checkbox"/> Approved _____ <input type="checkbox"/> Disapproved _____ <input type="checkbox"/> Contingent Approval _____
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### SIGNATURES

Committee Approval #1: \_\_\_\_\_ Date Signed: \_\_\_\_\_

Committee Approval #2: \_\_\_\_\_ Date Signed: \_\_\_\_\_

**Faxed to: WO Property Mgmt Group for monitoring compliance. Date Faxed: \_\_\_\_\_**

Submit (1) ORIGINAL and (1) COPY to: Architectural Control Committee (ACC): 6804 One Oak Road, Austin, TX 78749.