

## **OAK HARBOR OWNER'S ASSOCIATION**

OAK HARBOR ~ TANGLEWOOD SHORES P. O. Box 395, MABANK, TX 75147

## **PERMIT APPLICATION**

**NEW HOME CONSTRUCTION** 

Lot(s) No:	Street Address:
OWNER NAME: (PLEASE PRINT)	Owner Phone #
OWNER SIGNATURE:	Email
CONSTRUCTION START DATE:	PLANNED COMPLETION DATE:
·	pproval, at which time construction must be completed. If time frame, you must apply for a new permit.
BUILDER'S NAME:	Builder's Contact Info:
REQUIREMENTS:	
SITE PLAN WITH NEW STRUCTURE PLO ELEVATION MUST BE SHOWN.	TTED, SHOWING REQUIRED SETBACKS. IF LAKEFRONT LOT, 325
ALL REQUIREMENTS AS STATED IN OAK BE MET.	K HARBOR – TANGLEWOOD SHORES PROPERTY RESTRICTIONS MUST
Installtion of culverts	
BACK ASSESSMENTS ARE PAID	
ARCHITECTURAL CONTROL COMMITTEE COM	MMENTS:
DESCRIPTION OF WORK:	
SIGNATURE OF COMMITTEE MEMBER:	Date:
SIGNATURE OF COMMITTEE MEMBER:	Date:

**PERMIT FEE \$50.00**