## DILLARD CROSSING HOMEOWNERS ASSOCIATION, INC. - REQUEST FOR MODIFICATION REVIEW

## THIS APPROVAL MAY TAKE UP TO $\underline{15~\mathrm{DAYS}}$ FOR APPROVAL AFTER ALL REQUIRED INFORMATION IS RECEIVED

Name	Date	
Address	Lot and Phase	
City, State Zip	Phone Number	
Email(s)		
Please provide the Architectural Control Committee with all information necessary to evaluate the request thoroughly and quickly. Requests must include, without limitation, the following information: site plan (including all dimensions), color chips (if applicable), detailed description of request, list of materials, pictures (if applicable), and any other information as specifically required below or as required by the Design Guidelines approved for the community. Modifications without approval from the Committee are a violation of the Covenants and may result in fine and legal action by the Association.  Description of Modification Requested		
Estimated Start Date	Estimated Completion Date	
Adjacent homeowners MUST acknowledge the proposed requested change. This acknowledgement will be used in determining outcome but will not be binding upon the Review Committee. This section must be completed, or stated that no home exists at the time, or after a reasonable effort to obtain the signatures has been completed unable to obtain them.		
Lot Signature	In favor of Not in favor of	
Lot Signature	In favor of Not in favor of	
Lot Signature	In favor of Not in favor of □ □	
Under each of the most common categories below, <u>all</u> the items listed must be submitted. Please refer to the Covenants for other necessary information required for modifications such as detached structures, outdoor play equipment, pools, etc. <b>Incomplete requests will be disapproved.</b>		
LANDSCAPING, including gardens, landscape blinds, landscape edging  Asbuilt/HLP/Lot Plat/Survey  *Identify location of landscaping modification  Description:  Photo(s) of the requested location(s) to be modified  Plan denoting hardscape/plant materials, location and quantities  EXTERIOR LIGHTING, including exterior and landscape lighting  Description:  Number of lights:  Photo(s) of the requested location(s) of the lighting  Photo of the lighting	FENCING, including fenced blinds  Fencing must conform to the standards stated in the Design Guidelines Fence type: Height and maximum width of spans: Color/stain: Fence beams must be inside facing (interior), not visible to streets or lots Asbuilt/HLP/Lot Plat/Survey *Identify location of fencing and existing neighboring fencing Permit (if applicable) Materials: All nails, screws or fasteners shall be aluminum or hot-dipped galvanized All posts shall be anchored in concrete; ground clearance must be 2 inches	
EXTERIOR DECORATIVE OBJECTS, including planters, statuaries  Description: Photo(s) of the requested location(s) of the object(s) Photo(s) of the object(s)	DRIVEWAY, PATIO or WALKWAY  Asbuilt/HLP/Lot Plat/Survey *Identify location of driveway/patio/walkway modification  Photo(s) of the requested location(s) to be modified  Materials:	

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PLAY EQUIPMENT, including basketball goals	PRIVATE SWIMMING POOL, including hot tubs	
Asbuilt/HLP/Lot Plat/Survey  *Identify location of play equipment modification  Location must have minimum visual impact  Photo example of modification, requested location  Materials used should match existing materials of home  DECK or PORCH, including screened porches  Asbuilt/HLP/Lot Plat/Survey	Asbuilt/HLP/Lot Plat/Survey  *Identify location of pool, pool deck and pool equipment  Pool type:  Dimensions (maximum size 1,000 sq ft):  Color (must be white or blue):  Lighting (if any):  Permit  All pool related landscaping modifications must meet requirements of the Landscaping category	
*Identify location of deck/porch modification  Photo of the location of the deck/porch  Design rendering or scope of work  Dimensions:  Color must be clear or stained to match existing color scheme  Color code:	STORM DOORS and WINDOWS  Description and photo example of the storm door/windows including color Color must be compatible with existing primary and trim colors Photo(s) of the requested location(s) to be modified	
Materials must be Cedar, Cypress or No. 2 grade or better PT-wood Permit  EXTERIOR BUILDING ALTERATIONS, including painting and roofing  Colors/Materials to be used that are different than those existing Paint Brand, color name(s) and color code(s) Photos of your home and the homes on either side and those facing (in most cases adjacent/facing homes cannot be painted the same) Permit (if applicable)	BUILDING ADDITIONS  Asbuilt/HLP/Lot Plat/Survey  *Identify location of building addition  Photo(s) of the requested location(s) to be modified  Photo(s) from the location of the area to be modified of adjacent lots  Scope of work from contractor  Size, color, and detailed architectural drawing of addition  Exterior materials used must match existing exterior materials of home  Permit	
PLEASE READ CAREFULLY AND SIGN:  I understand that until I receive written approval by the Review Committee on my request that no work is to begin. I understand and warrant that these changes shall be made in conformance with the Design Guidelines. I understand that I am responsible for complying with all city and county rules and regulations. If the city/county needs to remove, relocate any fencing, structure, etc., all costs associated with this will be at my expense. This request is compliant with the Declaration of Protective Covenants, Conditions, Restrictions and Easements.  Neither Community Management Associates, the Declarant, the Association Board of Directors, the Association Review Committee, or the Association Covenants Committee, or their respective members, Secretary, successors, assigns, agents, representatives or employees, are liable for damages or otherwise to anyone requesting approval of any architectural alteration by reason of mistake in judgement, negligence or non-feasance, arising out of any action with respect to any submission. I hereby release and covenant not to sue all the foregoing from/for any claims or damages regarding this request or the approval or denial thereof.  Owner Signature  Date		
Date Received Review	Approved  Approval stipulations	
Approval stipulations or comments	Not approved	

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