

ACC GENERAL APPLICATION FORM AND INSTRUCTIONS
APPLICATION FOR CHANGE

ALL CONSTRUCTION CHANGES OR ALTERATIONS TO THE EXTERIOR OF ANY RESIDENCE WITHIN THE TRAILS HOMEOWNERS ASSOCIATION MUST CONFORM TO THE TRAILS COVENANTS AND RESTRICTIONS AND THE TRAILS ARCHITECTURAL CONTROL COMMITTEE (ACC) POLICY AND PROCEDURES AS AMENDED 9 JUNE 1994. ***NO CHANGE MAY TAKE PLACE UNTIL THE COMMITTEE HAS GRANTED APPROVAL.*** THE PROPERTY OWNER WILL BE RESPONSIBLE FOR ALL COSTS OF REPAIR OR DAMAGE TO PROPERTY OWNED BY THE ASSOCIATION. IT IS ALSO THE RESPONSIBILITY OF THE PROPERTY OWNER TO READ AND COMPLY WITH THE TRAILS COVENANTS AND RESTRICTIONS.

Name _____ Email: _____

Address _____ Tel.No.(H) _____ Tel.No.(C) _____

PROPOSED ALTERATION

Present Exterior Color

(Sample must be submitted)

Proposed Color Change

Primary _____
Trim _____

Shutters _____
Doors _____
Garage Doors _____
Roof Shingles _____

SURVEY/SITE PLAN IS REQUIRED FOR THE FOLLOWING

(With recorded dimensions)

FENCE: Style _____ Color _____ Material _____

POOL: Size _____ Enclosure Color _____ Material _____

(Mark location of pool machinery on site plan)

ROOM ADDITION: Size _____ Materials _____ Color _____ Roof _____

(Blueprints must be supplied for the following)

PORCH/PATIO/DECK: (with or without enclosure)

Size _____ Materials _____ Color _____ Roof _____

MISCELLANEOUS CHANGES: _____

ALL APPLICATIONS SHOULD INCLUDE:

A photograph of your house/property, emphasizing the area of change would be most helpful to the committee. Property owners in Multi-family associations must receive approval from their association before appearing before the Trails ACC. You should plan to attend the ACC meeting when your review comes before the committee. Applications that have committee approval are only valid for (6) months from approval. Extended time may be granted from the ACC if applicant requests same in writing, stating reasons and time frame. The original application, if approved, will BE RETURNED TO YOU. Digital Approved copies will be retained by the Trails HOA. MFA's **must have** ACC Approval & w/ officer's signature of approval.

Expected start date: _____

Expected completion date: _____

Signature of property owner

Date

FOR MULTI-FAMILY USE

Multi-family association name _____ **MFA Approval Date:** _____

MFA Signer(s) of Approval _____ **Officers Signature:** _____

TRAILS ARCHITECTURAL CONTROL COMMITTEE LOT # _____ DATE APPROVED _____

APPROVED BY: _____ / _____ / _____

APPROVAL VALID FOR 6 MONTHS
EXPIRATION DATE: _____