WOODLAND TRAILS NORTH CIA

Architectural Control Application

SERVICE@TXMGMT.COM, 832-910-7525

[NOTE: PLANS AND SURY	VEY must be submitted at least 30 days before activity begins	1
NAME:	DATE:	
(Please Print) PROPERTY ADDRESS:		
TROLEKTT ADDRESS.		
MAILING ADDRESS:	EMAIL:	
PHONE: (H) (W) _	Proposed Completion Date:	All
Applications Must Be Submitted com	plete details of the project.	
TYPE OF ARCHITEC	TURAL AND/OR LANDSCAPING IMPROVEMENT	
Check off or circle type of project		
Remodeling/Additions	Materials to be Used:	
Outside	Wood Stucco Brick	
Side walk Stairs	StoneConcrete	
Garage Doors/Exterior Doors	Other	
Driveway/Parking Pads	(Describe)	
Greenhouse/Sunrooms	Is material same color and type as on home?	
Gazebos/Sheds/Play	Yes No	
Equipment		
Swimming Pool/Solar Panels	Additional Comments:	
Decks/Patios/Carport		
Arbors/Overhangs		
New Construction		
Fences/Fence Additions		
Landscaping Front and/or back yd	Contractor:	
Satellite Dishes and/or Antennae	Phone:	
Roofing Replacement	Email:	
Other:		
PAINTING:		
Paint house new color	Paint trim new color Painting fence	
Attach paint co	lor samples for stucco, trim, fascia and/or fence.	
HOMEOWNER SIGNATURE:		_
To expedite the processing of	your application, please show and explain your plans	s. The
	may also contact you directly.[IF ADDITIONAL SPACE IS NE	
ApprovedNo	t ApprovedConditionally Approved	
By:	Date:	
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