

The Villas at Aledo Homeowners Association Inc.

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**APPLICATION FOR APPROVAL OF
ARCHITECTURAL IMPROVEMENT OR MODIFICATION**

Date: _____

Name of Applicant (Owner): _____

Property Address: _____

Telephone Number: _____ Email: _____

Request for: Preliminary Approval Final Approval

The undersigned Owner/s hereby request approval of the architectural improvements or modification to the above-mentioned property/unit.

Description of Improvement or Modification:

Project Start Date: _____

Project End Date: _____

Contractor Information:

Contractor Name: _____

Telephone Number: _____ Email: _____

Specific plans for improvement and/or modifications are:

Attached

Not attached

Signature of Owner/s:
