

INDIAN OAKS HOMEOWNER'S ASSOCIATION

P.O. BOX 903, QUINLAN, TX 75474 IndianOaksHOA@YAHOO.COM

**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

I understand that under the Indian Oaks Homeowners Association Covenants, Conditions and Restrictions, the Architectural Control Committee will act on this request and provide me with written response of their decision. I further understand and agree to the following provisions:

1. I assume all liability and will be responsible for all damage and/or injury which may result from performance of this work now and in the future.
2. I will be responsible for complying with, and will comply with, all applicable federal, state, and local laws, codes, regulations, and requirements in connection with this work, and I will obtain any necessary governmental permits and approvals for the work.
3. I understand and agree that the Indian Oaks Homeowners Association, its Board of Directors, and or its designated committee's approval of this request shall not be understood as the making of any representation or warranty that the plans, specifications, or work comply with any law, code, regulations, or governmental requirement.

Signature of Owner/s:

Authorized Board Signature _____
Approved Y/N

Date _____