Westmoreland Homeowners Association, Inc.

Architectural Improvement Application and Review Form

Date Submitted: Date Received:

Owner:

Lot#: Phone:

Address:

Nature of Project/Improvement:

Colors To Be Used:

(Please include manufacturer's color sample.)

Location:

(Please provide a plot plan with location and dimensions of project/improvement. Please note existing structures and lot set backs on the plot plan).

Dimensions:

Construction Material:

Supplier, or Contractor: License #:

A sketch, photograph, or blue print of all improvements must be attached to the application to show elevation, location and dimensions.

Send application to: Westmoreland Homeowners Association, Inc.
c/o Singer Association Management, Inc.
P. O. Box 630292
Irving, TX 75063-0292
Office (972) 402-8352
Fax (214) 496-9015

NOTICE

1. All necessary permits (City/County) must be obtained from the proper agencies prior to beginning construction.

2. All work must be done in a workmanship-like manner and must be substantially, the same as the diagram and/or drawings submitted for approval.

3. To promote an attitude of neighborliness, and a sense of community among the residents, the Committee encourages you to discuss your project with your neighbors. It is not a requirement of the application. Their signatures indicate an awareness of your intent and do not constitute or indicate approval or disapproval by the Committee.

Neighbor Awareness Signatures

Name: _____
Address: _____
Lot: _____
Comment: _____

Name: _____
Address:_____
Lot: _____
Comment: _____

Name: _____
Address: _____
Lot: _____
Comment: _____

Name: _____
Address: _____
Lot: _____
Comment: _____

Owner Acknowledgements

1. …that no work on this request shall commence until written approval of the Architectural Control Committee has been received by me;

2. …that any construction or exterior alteration undertaken by me, or in my behalf before approval of this application is not allowed; that; if alterations are made, I may be required to return the property to its former condition at my own expense if this application is disapproved wholly or in part; and that I may be required to pay all legal expenses incurred;

3. … that any variation from the original application must be resubmitted for approval.

Owner/Applicant Signature: _____

Date: _____

Please Attach: (1) Sketch, photo, catalog illustrations, etc.
(2) Copy of survey marked with change being requested.

FOR COMMITTEE or BOARD OF DIRECTORS USE ONLY: Date: _____

Approved By: _____ _____

_____

Disapproved By: _____ _____

_____

Comments: _____