Windstar Owners Association, Inc.
Architectural Change Request Form

Name: _____

Address: _____

Cell Phone: ( ) _____ Home Phone: ( ) _____

Email address_____

1. Describe the proposed change, including all measurements and specifics: _____

_____

_____

_____

_____

2. Will there be changes or modifications in basic utility services or existing structures to accommodate the proposed change? If so, please indicate:

	YES	NO		YES	NO
Electric	_____	_____	Exterior Walls	_____	_____
Telephone	_____	_____	Patio Facing	_____	_____
Gas	_____	_____	Patio Slab	_____	_____
Water	_____	_____	Sidewalks	_____	_____
Sewage	_____	_____	Pavement	_____	_____
TV Cable	_____	_____	Other(Describe)	_____	_____

3. Please list below the major construction materials and colors that will be used in this project. Be as specific as possible (Exterior materials must conform to those used on the original building or be sufficiently compatible.)

_____

_____

_____

4. Will any part of the proposal improvement extend beyond your property line?

Yes _____ No _____

If Yes, please provide the following information on the affected homeowner below:

Name: _____ Phone #: _____

Address: _____

5. Would any part of the proposed improvement extend into any Common Area, Utility, Drainage or Sewer Easement, Landscape Easement, Landscape Preservation Easement, or Lake Easement shown on the plot of your lot? YES _____ No _____

6. If the proposed project is an addition or alteration that would change the structural appearance of your residence, please attach the following information:

   A. Plot plan indicating the location and dimension of the project.
   B. Blueprints or working drawings indicating all dimensions and elevations.
   C. If available, a photograph or drawing of a similar completed project.
   D. Color swatches/chips of the paint(s) and/or stain(s) to be used.

7. Project Schedule:

   A. The work will be performed by:
      _____ Homeowner
      _____ Contractor Name: _____
      _____ Both

   B. Please indicate the approximate time needed to complete the project, subsequent to the committee approval: _____

   C. When do you plan to start the work? _____

   D. Please indicate any building permits that will be required:

      _____ Permit Obtained? _____
      _____ Permit Obtained? _____

Note: A plot plan indicating the location and dimensions of the proposed improvement must be included for any architectural change request. This request form will be returned to you without approval if a plot plan is not included.

Note: All submitted materials will be retained by the Association. You may wish to make a copy for your personal records.

*****************SIGNATURE REQUIRED*****************

I hereby acknowledge that I have read and understand the Architectural Control Standards set forth by the Architectural Control Committee.

Homeowners Signature: _____

Date: _____

If project is not completed by 90 days after approved you need to resubmit the form for the re-approval to the ACC Committee

Request Denied: _____ Reason: _____

ACC Member Signature: _____ Date: _____

ACC Member Approval: _____ Date: _____

Board Member Approval: _____ Date: _____