

# APPLICATION FOR ARCHITECTURAL CHANGE

**TO:** Gables at NorthHill Homeowners Association, Inc. - Architectural Review Committee  
c/o Lone Star Association Management, Inc.  
2500 Legacy Drive, Suite 220  
Frisco, Texas 75034  
Office: 469-384-2088 Fax 469-384-4653

Account #

**NAME:**

**ADDRESS:**

**PHONE:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**Directions: (Please print or type)**

Please use area below to briefly describe all proposed improvements, alterations or changes to your lot or home. Attach required detail by sketches, drawings, clippings, pictures, catalog illustrations and other data. Show location of item on your property on a copy of the survey. Application and accompanying forms must be submitted in duplicate via certified mail or hand delivery to the above representative.

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**Signatures:**

Consent is required from at least the owners of four (4) properties who are most affected because they are adjacent and/or have a view of a proposed change. Should you disapprove, please indicate with the reason for your disapproval noted in the comments section. Your signature indicates an awareness of your neighbors' intent to make the proposed change and does not constitute or indicate approval or disapproval by the committee.

**Name:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**Comments:** \_\_\_\_\_

**Name:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**Comments:** \_\_\_\_\_

**Name:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**Comments:** \_\_\_\_\_

**Name:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**Comments:** \_\_\_\_\_

**Owners Acknowledgments:**

1. . . . that no work on this request shall commence until I have received written approval of the Architectural Control Committee;
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 approval is contingent upon construction or alterations being completed in a workmanlike manner;
4. . . . that members of the Architectural Control Committee are permitted to make a routine inspection;
5. . . . that there are architectural requirements covered by the Covenants and a review board process as established by the Board of Directors;
6. . . . that the alteration authority granted by this application will be revoked automatically if the alterations requested have not commenced within thirty (30) days of the approved date of this application and completed within sixty (60) days unless otherwise approved by the ACC and Board of Directors.
7. . . . that all proposed improvements must meet city, state and local codes. My signature indicates that these standards are met to the best of my knowledge. I understand that applications for all required building permit(s) are my responsibility;
8. . . . that any variation from the original application must be resubmitted for approval.
9. . . . if approved, said alteration must be maintained per the Declaration of Covenants, Conditions and Restrictions.

Owner/Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

- Attachments: ( ) Sketch, photo, catalog illustrations, etc.  
 ( ) Copy of survey marked with change being requested.

**FOR COMMITTEE USE ONLY**

**ARCHITECTURAL CONTROL COMMITTEE**                      \_\_\_\_\_ **Approved**                      \_\_\_\_\_ **Disapproved**

**Signatures:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Comments:** \_\_\_\_\_

**BOARD OF DIRECTORS**    \_\_\_\_\_ **Approved**    \_\_\_\_\_ **Disapproved**

**Signatures:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Comments:** \_\_\_\_\_