## OAK SPRINGS HOMEOWNERS' ASSOCIATION ARCHITECTURAL APPROVAL FORM

TO: Architectural Control Committee		
From:	Date Submitted:	
Address:	Phone:	
Request the following architectural change be a	authorized.	
Request the following architectural change be a		
DESCRIPTION:		
SPECIFICATIONS (specify all that apply)		
Model:		
Color:		
Height:		
Materials:		
Drawing/Plan/Photo (attach if more space is ne	cessary)	

Applicant hereby warrants that Applicant shall assume full responsibility for:

- A. All landscaping, grading, and/or drainage issues relating to the improvements (including replacing bonds or escrows posted by the Developer currently in place affect the Lot);
- B. Obtaining all required Town or County ordinances relating to said improvement;
- C. Complying with all applicable Town or County ordinances;
- D. Any damage to adjoining property (including common area) or injury to third persons associated with the improvement.

TO:	Homeowner
FROM:	Architectural Control Committee

	Your request for architectural	change is hereby Approved	/	Disapproved
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If disapproved, for the following reason(s):