



Name _____

Address _____

Phone _____ Email _____

The inclusion of an email address authorizes the use of electronic mail for official responses to this request.

Pool Company _____ Email _____

The **Declaration of Covenants, Conditions and Restrictions** (the "Deed Restrictions") for **Lakes of Woodtrace Community Association, Inc.** specifies that all improvements as defined in the Deed Restrictions must be approved in writing by the Architectural Control Committee at least 30 days prior to beginning construction or improvement. To assist in your compliance with this restriction, complete this form and submit it with your plans and specifications for the proposed improvement.

Mail, fax or email the completed form to:
 Community Solutions
 P.O. Box 5191, Katy, TX 77491
 F (713) 344-0472
 service@csutx.com

The plans and specifications will not be considered complete without the following items:

- A **refundable Pool Deposit** is required in the amount of \$4,000.00 payable to Lakes of Woodtrace.
- A **plot plan** or **survey** showing the location and dimensions of all existing and proposed improvements.
- Existing and finished **grades** and lot **drainage provisions** shall be indicated.
- The **access point for entry and location of pool equipment** for all improvements marked on the survey. Access through a Common Area Reserve will not be permitted. Any damage to the common area reserve(s) will result in forfeit of the pool deposit, demand for restoration and a Notice of Non-Compliance being filed against your lot until restoration is complete.
- Estimated **time frame for completion** of project _____.

APPROVAL REQUESTED

Description of Improvements _____

POOL ARCHITECTURAL REVIEW APPLICATION

I understand and agree that it is the duty of the property owner and any contractor or consultant employed by the owner to determine that the proposed improvement(s) are structurally, mechanically and otherwise safe and that it is designed and will be constructed in accordance with the architectural restrictions applicable.

I agree that neither the Association, nor any Director, Officer, Committee, Managing Agent, member or employee thereof, shall be liable for damage or otherwise because of the approval or non-approval of this application or any facet thereof. I hereby release, indemnify and hold harmless the Indemnified Parties from any claim, liability, damage, suit and attorney's fees arising out of any action or omission of any of Indemnified Parties with regard to this application and in regard to the design, plan review, construction or inspection of the proposed improvements, including any potential claims.

Signature _____ Date ____/____/____

FOR OFFICE USE ONLY

Date Received ____/____/____

Deposit Received ____/____/____ Number _____

Additional Info Required ____ Yes ____ No

Additional Info Received ____/____/____

ACC RECOMMENDATION

Approved

Conditional Approval

Denied

Signature _____ Date ____/____/____