

WDL HOMEOWNERS ASSOCIATION, INC.

REQUEST FOR APPROVAL – ARCHITECTURAL CONTROL COMMITTEE

Send this form to: WDL HOMEOWNERS ASSOCIATION, INC
2201 MAIN ST STE 1180
DALLAS TX 75201

NAME: _____
ADDRESS: _____
HOME PHONE: _____ WORK PHONE: _____
EMAIL ADDRESS: _____

My request refers to the following types of improvements(s): (check all that apply)

_____ Basketball Hoop/Backboard	_____ Landscaping	_____ Sauna/Hot Tub
_____ Deck/Patio Slab	_____ Painting	_____ Shed/Greenhouse
_____ Deck/Patio Cover	_____ Play Equipment	_____ Walls – Retaining
_____ Dog Run/Dog House	_____ Room Addition	_____ Other _____
_____ Fencing	_____ Swimming Pool	_____ Other _____

ATTACH PLANS AND SPECIFICATIONS – include height, width, depth, types of materials, color, location, relation to property line/fencing/neighbor, paint sample, and other information pertinent to the request.

Approval is based on conformance with the Declaration of Covenants, and aesthetic concerns.
No representation is made of approval of structural integrity. Drainage issues and existing slopes are crucial elements of exterior changes and should be strongly considered in the installation of any materials.

I understand the approval of the Architectural Control Committee must be obtained before I can proceed with my project. I understand that approval by the ACC does not constitute approval by the local building department or any other agency which may require prior approvals. I understand I may be required to obtain permits, licenses, pay fees or obtain other professional opinions and/or certifications. I agree to complete all improvements as they are submitted and understand that I must submit my request if modifications to these plans become necessary. I agree to complete the improvements promptly and in a good workmanlike manner.

Homeowner's Signature: _____ Date: _____

THIS AREA TO BE FILLED OUT BY ARCHITECTURAL REVIEW COMMITTEE

DATE RECEIVED BY ACC: _____ DATE APPROVED OR DENIED BY ACC: _____

	Approved as Submitted	Approved with Conditions	Denied as Submitted
Signature	_____	_____	_____
Signature	_____	_____	_____

Conditions for Approval (use reverse side if necessary):

Reasons for Denial: (use reverse side if necessary):

