

Lexington Woods Trails Community Association, Inc. Architectural Review Application

Please fill out this form completely, and attach plans, drawings, pictures, specifications, etc. showing the nature, kind, shape, height, materials and location of your project. Your application will not be considered complete until all necessary information is provided.

Name		
	Date	
Address	Phone	
City, State, Zip	Email	
Description		
Color		
Location		
Dimensions		
Material	(To be no later than 30 days unless specified)	
Start date		
Completion date		

If approval is granted, I agree to build in accordance with this application and the final approved plans and specifications. I understand that I am responsible for safety, for any liability caused by my project, and for getting any city or county permits that may be necessary depending on the nature of my project. By submitting this request I represent that I have read the applicable portions of the governing documents including the Declaration, Covenants, Architectural Guidelines, Board Resolutions filed with the county, Rules and Regulations, or any other applicable governing documents of the Association. I understand that approval of my plans, if granted, will not imply a waiver granting variance of any applicable restrictions outlined in the governing documents unless the plans clearly indicate such variance is needed. In submitting this document I

understand that it in fact m	y responsibility to notify m	y neighbors of any	work conducted tha	t may involve or
interfere with their property	or belongings located upor	n their property.		

Signed	Date
Jigi ieu	Date

Please return this form via email to the Community Manager at LexingtonwoodstrailsHOA@hotmail.com. Deliver or mail this application to: Lexington Woods Trails HOA P.O. Box 1959
Spring, Texas 77373