

# BRAZOS GARDENS

## HOME IMPROVEMENT REQUEST



In order to protect each individual homeowner's property value and privacy, it is required for any homeowner or group of homeowners planning improvements or changes to their deeded property (properties), including landscaping, to submit a home improvement request. This request is reviewed by the Architectural Control Committee to ensure compliance with deed restrictions, local statutes, and to protect neighboring homeowners. **If any change is made that has not been approved, the Committee has the right to ask the homeowner to remove the improvement and/or change from the property.** *Your sample, photos, brochures, or drawings must be submitted with this application. If not, this request may automatically be denied and this application will be returned to you.*

Please complete the entire form

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

Owner Name: \_\_\_\_\_

Property Address: \_\_\_\_\_

Phone Number (HM): \_\_\_\_\_ Work: \_\_\_\_\_

NOTE: The Association will not be held responsible for ensuring compliance with restrictions, utility easements, building setbacks, building codes and other restrictions imposed by other local or state governing bodies or companies.

1. Describe in detail the change or improvement requested. (Attach a copy of the plot with any elevation changes.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Who will perform the actual work? \_\_\_\_\_  
\_\_\_\_\_

3. The change or improvements will be located where?

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Front of House | <input type="checkbox"/> Roof            | <input type="checkbox"/> Back of House |
| <input type="checkbox"/> Patio          | <input type="checkbox"/> Basketball Goal | <input type="checkbox"/> Other         |
| <input type="checkbox"/> Side of House  |  | _____                                  |

4. ITEM:

Please attach a color sample front the color chart of a chip of the actual paint of stain.

The request cannot be approved without them

| TYPE/COLOR               |              | TYPE/COLOR               |               |
|--------------------------|--------------|--------------------------|---------------|
| <input type="checkbox"/> | Paint _____  | <input type="checkbox"/> | Screen _____  |
| <input type="checkbox"/> | Stain _____  | <input type="checkbox"/> | Cement _____  |
| <input type="checkbox"/> | Lumber _____ | <input type="checkbox"/> | Fencing _____ |
| <input type="checkbox"/> | Brick _____  | <input type="checkbox"/> | Other _____   |

I understand that the Architectural Control Committee (ACC) has up to thirty (30) days but will act upon this request as quickly as possible and contact me regarding their decision(s). I agree not to begin on the property changes or improvements until the ACC informs me of their approval.

INDEMNITY AND HOLD HARMLESS AGREEMENT

Homeowner agrees to and will indemnify and hold harmless the Association, it's Officers, Directors, Members, Employees, Agents and Deputies, from and against any and all liability of every kind, including all expenses of litigation, court costs and attorney's fees, for injury to or death of any person, or for damage to any property arising out of or in connection with the above referenced ACC request, including where such injuries, death, or damage are caused by the Association's sole negligence or the joint or concurrent negligence of the Association and any other person or entity.

|                        |                        |
|------------------------|------------------------|
| _____                  | Start Date: _____      |
| Signature of Homeowner | Completion Date: _____ |

Please complete and return to:

**BRAZOS GARDENS**  
**11301 Richmond Avenue, Suite K 108**  
**Houston, Texas 77082**  
**frontdesk@eamhouston.com**  
**832 660 0700**

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**ARCHITECTURAL CONTROL COMMITTEE USE ONLY**

☐ APPROVED with the following restrictions, if any:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

☐ DISAPPROVED for the following reasons:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

|                      |             |
|----------------------|-------------|
| ACC Signature: _____ | Date: _____ |
| _____                | Date: _____ |
| _____                | Date: _____ |
| _____                | Date: _____ |