



**STEINER RANCH MASTER ASSOCIATION (SRMA) &
RESIDENTIAL OWNERS ASSOCIATION (SRROA)
ARCHITECTURAL COMMITTEES
ARCHITECTURAL MODIFICATION APPLICATION FORM**

FOR OFFICE USE ONLY
Received: _____
AP Complete: _____

Applicant Name: _____ Date: _____

Property: _____

Mailing Address (If Different from Property): _____

Applicant Contact Phone Number(s): _____

Applicant E-mail Address: _____

Contractor Name (If Applicable): _____

Contractor Phone Number (If Applicable): _____

Please list the modifications to the dwelling and/or addition of accessory structure(s) for which you are requesting approval:

The following items must accompany this request:

- Plan with elevation views of proposed improvements at a minimum of 1/8 inch scale. Provide a description of materials to be used (including dimensions & color samples).
- Plot plan indicating location of proposed improvements and dimensions to adjacent property lines (the dimensions should be clearly marked in feet and inches)
- Any addendum specific to the modification. (Ex: pool, deck, etc.)

The AC may request that you provide additional information before a decision on your request can be determined. The application is not complete until all information requested has been received. All modifications must comply with applicable deed restrictions and design guidelines. A \$500.00 refundable deposit check must be submitted before the application will be reviewed. The AC has a maximum of thirty (30) days to render a decision. Any work commencing prior to receiving written approval is a violation and will constitute fines. Call (512) 266-7553 if you have any questions.

Please read the following statements and initial next to each line to indicate that you have read and understand the statement:

1. ___ I have read the guidelines and agree to abide with them in regards to the modification as proposed.
2. ___ I understand that I must submit a \$500.00 refundable deposit before my application will be reviewed.
3. ___ I understand that any contractors I employ are **not** permitted to place signs on my property advertising their business.
4. ___ I understand that greenbelt access is **not** granted for construction without written permission from the Architectural Committee. (A formal application and a second deposit must be submitted before a greenbelt access request will be considered by the Architectural Committee.)
5. ___ I hereby agree not to begin any improvements or changes until the Architectural Committee notifies me of their approval in writing.
6. ___ I understand that **any** changes to the approved plans must be resubmitted to the Architectural Committee **before** the changes are implemented.
7. ___ I understand that I must call to schedule an inspection no more than seven (7) days after the assigned completion date. Deadline extension requests must be submitted in writing. ****Please note that it is the responsibility of the homeowner, not the contractor, to call in the inspection.****

Owner Name (Print)

Signature of Owner

FOR OFFICE USE ONLY		
Architectural Modification Application is:	<input type="checkbox"/> Approved	<input type="checkbox"/> Not Approved
Date Reviewed: _____	Date Improvements to be Completed: _____	
Comments: _____		

Architectural Control Committee:		
_____	_____	_____
AC Representative	AC Representative	AC Representative