Ventana Homeowners Association - ACA

Property Modification Approval Request Form

ACA Use Only
Rq. No.
Phase

As each of us bought our property in an HOA, we agreed by our signatures to abide by the Declaration of Covenants, Conditions and Restrictions (a.k.a. CCRs or Deed Restrictions). The Deed Restrictions protect our property values by keeping the community a highly desirable place to live. ACA (Architectural Control Authority) approval must be obtained prior to the start of your project. To avoid delay, make your request as complete as possible and type or print legibly. Incomplete requests will be returned for additional information. Incorrect information or changes made after approval invalidates approval. The ACA tries to assure that all changes to our properties conform to the appropriate Deed Restrictions. Thank you for your understanding and cooperation.

Name(s)		
Address		
-Mail		
Phone(s)		Best time to call
BOUT THE PRO	JECT	
Proposed start date		Proposed completion date
Describe the natu	ire of the project (attach pages as necessar	γ)
ocation (attach s	sketch/drawing)	
Dimensions		Distance from fences and easements
Colors		Shape
laterials		
Builder		
MPORTANT: Inc		any other supporting documents indicating project's location, easements, etc.
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BOUT THE REQUES NO N/A	d its relationship to property lines, neighbors, construct UIREMENTS I/We have read the appropriate Deed Re I/We have obtained a City of Fort Worth This project will require A fence removal	estrictions building permit (attach copy) (if yes, inform Association Manager)
BOUT THE REQUES NO N/A	UIREMENTS I/We have read the appropriate Deed Re I/We have obtained a City of Fort Worth This project will require A fence removal Completed project will be visible from the	estrictions building permit (attach copy) (if yes, inform Association Manager)
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