

Bear Creek Ranch 3 Home Owners Association

Property Modification Approval Request Form

The Declaration of Covenants, Restrictions and Conditions (a.k.a. CCRs or Deed Restrictions) of Bear Creek Ranch 3 require that 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. Thank you for your understanding and cooperation.

Name(s)			
Address			
Email			
Phone		Today's Date	
Proposed Project Start Date		Proposed Project Completion Date	
Describe the nature of the project (attach pages as necessary IMPORTANT: Include plan view and elevation drawings (to scale) plus any other supporting documents indicating project's location and its relationship to property lines, neighbors, construction, easements, etc.)			
Location (please attach a site map or survey of the property)			
Dimensions		Distance from fences and easements	
Colors		Shape	
Materials			
Builder			
Other (specify)			
YES	NO	N/A	
			Have you read the applicable deed restrictions?
			Will this project require fence removal?
			Will this project be visible from the street?
			Will this project require septic system modification? If Yes, attach approval from Parker County Health Department. Any alteration to a septic system requires a permit from Parker County.

Projects not completed within twelve (12) months of original submission must resubmit and may be subject to fines.

Homeowner's Signature	Date
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By signing this document, I agree to email a photograph of the completed project to ACC@GloboLink.com.

Submissions are to be made to:

ACC@GloboLink.com

PO Box 1532

Fax: 480-436-6469

Keller TX 76244-1532

Committee Use Only

YOUR REQUEST FOR PROPERTY MODIFICATION HAS BEEN:

APPROVED

DISAPPROVED

CONDITIONALLY APPROVED

Comments or reasoning for disapproval:

Approval by ACC does not circumvent, modify or grant a variance from City, County, State or Federal building safety codes or ordinances.

_____ Date

_____ ACC Authorized Representative