

575 – Roseheart Homeowners Association

Improvement Request Form

210-829-7202 Office * 210-829-5207 Fax * 866-232-4386 Toll Free

First Service Residential Website - www.ams-sa.com – E-Mail acc.sa@fsresidential.com

In accordance with the recorded covenants, conditions and restrictions of the Association, and in order to protect each individual lot owner's rights and values, it is required that any lot owner considering improvement of their deeded property including, but not limited to, patio covers, decks, outside buildings, fencing, building add-ons, etc., **submit the following information to the Committee prior to initiating work on the planned improvements:**

One Form Per Request

1. **\$1,500/\$2,000 Large Construction/Outriggers Deposit** (Pools, Room Additions, or Any Project Requiring a Concrete Truck or Other Heavy Equipment, etc.) **If there is no damage at completion of project, the deposit minus 15% will be returned.**
2. **Improvement Request Form Completed and Signed by Homeowner (s) (no renters or builders)**
3. **Material list, detailed building plans, detailed drawings, size of improvement, color swatches and photos.**
4. **A copy of the official site plan (no hand-drawn or computerized replicas) of your property showing the exact location of the improvement. Please check your closing papers for the land survey (site plan) showing the Lot with easements, setbacks and a footprint of the home.**

FAILURE TO SUBMIT THE REQUESTED ATTACHMENTS (ITEMS 1, 2, 3 & 4) PRIOR TO CONSTRUCTION MAY RESULT IN DENIAL OF YOUR REQUEST FOR IMPROVEMENT.

The Committee has the right to request that an owner remove any improvement installed without prior written approval. Any homeowner considering any exterior improvement to their property is urged to review the recorded deed restrictions prior to their initial request.

Owner Name (s): _____

Property Address: _____ City: **San Antonio** State: **Texas** Zip: **78259**

Mailing Address: _____ City: _____ State: _____

Zip: _____ E-Mail Address: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Who will do the actual work on this improvement? _____

Briefly describe the improvement you propose:

Location of improvement (check actual areas that apply):

Front of dwelling

Back of dwelling

Side of dwelling

Type of Improvement (check or circle which improvement applies to your request): **Please remember one request per form**

In-Ground Pool (**Location indicated on official site plan**)

Spa/Hot Tub

Fencing/ Extend Fence (**Distance from front corner of Home**)

Gutters

Paint House Exterior (**Indicate Paint Scheme Colors Below**)

Room Addition (**Elevation Drawings**)

Play Structure (**Height, Width & Length and Tarp Color**)

Landscaping

Front Yard Statuary/Bird Bath/Water Fountain

Replace Door or add Screen/Storm Door

Permanent Gazebo

Install Satellite Dish (**Indicate Proposed Location**)

Remove Tree (Size is > 4" Diameter at 12" Above Ground)

Walkway/Sidewalk

Wall Art/Outside Decor

Porch Railing

Exterior/Landscape Lighting

Extend Driveway

Sprinkler System (**Show location of lines and heads on site**

Solar Screens/Window Treatments

plan) Deck

Patio/Patio Cover/Extend Patio–**Rear of Home ONLY**

Replace Roof (**Sample/Warranty Year Required**)

Arbor/Trellis

Solar Panels (**Indicate Proposed Roof Locations**)

Other: _____

Form Date: January 2016

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Materials to be used for the improvement (check and specify applicable items):

- Brick - Color, Wood - Type, Iron - Fence Color, Paint - Color (sample), Hardi-Plank - Color, Exterior Paint Colors (Stucco/Trim/Fascia), Other (explain), Cement - Top Finish, Siding (type/color), Flagstone - Color, Stain - Color (sample), Rock/Stone - Color

All color samples must be submitted and a list of all building materials/or pictures.

I understand that the Committee will act on this request within (30) thirty days of receipt and contact me in writing regarding their decision. I agree not to begin construction/installation without written approval from the Committee. I understand that all construction shall meet City/County code, and that Committee approval does not override City/County codes, but rather, is intended to work in conjunction with them.

Estimated Start Date / Estimated Completion Date

A checked box below is acknowledgment of an electronic signature.

Homeowner 1 Typed Name or Signature (mandatory) / Date

Homeowner 2 Typed Name or Signature (if required) / Date

RETURN COMPLETED FORM TO: Architectural Department, 1600 N.E. Loop 410, Suite #202, San Antonio, Texas 78209

OFFICE USE ONLY
Date:
Received By:
Forwarded To Committee:

COMMITTEE USE ONLY:

Committee comments/suggestions:

- Committee Member Signature, Date, Approved, Denied (repeated 5 times)

**First Service Residential Services
Architectural Department**

1600 N E Loop 410, Suite 202

San Antonio, Texas 78209

210-829-7202 Office * 210-829-5207 Fax

First Service Residential Website - www.ams-sa.com – E-Mail acc.sa@fsresidential.com

Check List For Submittals

- Yes N/A **\$1,500/\$2,000 Large Construction/Outriggers Deposit** (Pools, Room Additions, or Any Project Requiring a Concrete Truck or Other Heavy Equipment, etc.) **If there is no damage at completion of project, the deposit minus 15% will be returned.**
- Yes N/A Request Form – Signed by **Homeowner (s)** (no renters or builders)
- Yes N/A Photo/Drawings/Brochures
- Yes N/A Paint/Stain Samples and Name of Color
- Yes N/A Dimensions and Elevations
- Yes N/A Material List i.e. type of wood, siding, rock/flagstone, décor, iron, etc.
- Yes N/A The Committee requires photos of all competed projects.
- Yes N/A Official Site Plan (survey) issued in closing papers. No Computerized replicas will be accepted.
- Yes N/A MUST show exact location of improvement on site plan (survey).

Release Form for Contractors

(If you would like your contractor to be able to access information regarding your request please fill out the release form below.)

Note: First Service Residential will not release any information to your contractor without this form filled out and signed by Homeowner.

I (We) _____
give First Service Residential permission to release information about my submitted request to my contractor _____. The request is for a _____
at the following property address _____.

A checked box below is acknowledgment of an electronic signature.

Homeowner (1) Typed Name or Signature Date

Homeowner (2) Typed Name or Signature (if required) Date

Click Below to Save Form to Computer
Submit completed form and attachments
to First Service at acc.sa@fsresidential.com

Click Below to Clear Form

Click Below to Print