## Mill Creek Homeowners Association ARCHITECTURAL IMPROVEMENT / CHANGE APPLICATION

The completed form must be emailed to: ACC@MCHOA.net

Homeowner Name				
Homeowner Name:  Property Address:				
	:			
Phone:	E-mail:			
Describe Modification/Impre	ovement Project, including dimen	sions, location and m	naterials involved:	
Has owner reviewed the Dec	larations of CC&Rs for the Associated	ciation?	YES	NO
Was the City of Colleyville contacted about necessary permits?  Will modification/improvement be visible from the street in front of home?			YES	NO NO NO
			YES	
			YES	
Preferred Project start date:	Estima	ated completion date:		
Name, address, phone numb	er(s) of Contractor(s) performing	work:		
<ul><li>★ Attach copy of plat surv</li><li>★ Additional landscaping</li></ul>	or's plans and/or drawings for any yey indicating where modification must indicate name of plants or to completed application and acknow	n/improvement will o rees to be added		
roperty Address	Homooynars Sign	aturo		Data
Topetty Address	Homeowners Sign	ature		Date
The completed form m	ist be emailed to: AC	CC@MCHOA.n	et	