

**Promontory Pointe SUBDIVISION  
HOME IMPROVEMENT REQUEST FORM**

Unit \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Return this form and any required attachments to:

**Diamond Association Management & Consulting**

14603 Huebner Road, Building 40  
San Antonio, Texas 78230  
Office: 210-561-0606 Fax: 210-690-1125  
**e-mail: acc@damctx.com**

To protect neighborhood owners' rights and property values, the Declaration of Covenants, Conditions and Restrictions requires that any owner who is considering an improvement to their deeded property submit a request to the Architectural Control Committee and obtain approval prior to initiating work on any planned improvement. If any work is done by an owner without first having obtained approval, the Committee has the right to take the necessary action against the owner to remedy the situation.

Please complete both pages of this form in detail.

Owner's Name \_\_\_\_\_ Home Phone \_\_\_\_\_  
Address of Property \_\_\_\_\_ Work Phone \_\_\_\_\_

Email Address: \_\_\_\_\_  
Briefly describe the improvement you propose: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Who will do the actual work on this improvement? \_\_\_\_\_  
\_\_\_\_\_

Location of the improvement (check all that apply):  
\_\_\_\_ Front of house                      \_\_\_\_ Back of house                      \_\_\_\_ Side of house  
\_\_\_\_ Roof of house                      \_\_\_\_ Garage                      \_\_\_\_ Patio  
\_\_\_\_ Other (describe) \_\_\_\_\_

Material to be used for the improvement (check and complete all applicable items):  
\_\_\_\_ Brick - Color \_\_\_\_\_                      \_\_\_\_ Cement  
\_\_\_\_ Siding - Type \_\_\_\_\_                      \_\_\_\_ Fencing - Type \_\_\_\_\_  
\_\_\_\_ Wood - Type \_\_\_\_\_  
\_\_\_\_ Paint - Color(s) \_\_\_\_\_  
Will the paint color(s) match the home's existing paint (if not, please explain below)? \_\_\_\_\_  
\_\_\_\_ Stain - Color \_\_\_\_\_                      What is being stained? \_\_\_\_\_  
\_\_\_\_ Roofing (describe) \_\_\_\_\_  
\_\_\_\_ Electrical (describe) \_\_\_\_\_  
\_\_\_\_ Other (explain) \_\_\_\_\_  
\_\_\_\_\_

Comments/explanations: \_\_\_\_\_  
\_\_\_\_\_

Property Address \_\_\_\_\_ Improvement \_\_\_\_\_

Please include the following items, as applicable, with your request:

1. On a copy of the Land Title Survey, which you received when you purchased your home, show the location of the improvement (such as a room addition, pool, spa, gazebo, storage shed, deck, patio, patio/deck cover, satellite dish, gutters and downspouts, basketball goal, security and landscape lighting, cuts into the natural grade and similar types of improvements) relative to the property boundaries, easements and building setbacks for your lot.
2. For a room addition, provide floor plans and elevation drawings of the home exterior showing the addition.
3. Provide scaled footprint and elevation drawings for any outbuilding, deck or patio/deck cover.
4. If installing a pool or in ground spa, provide a copy of the contractor's pool/spa site plan.
5. Any physical change to any structure must include material and color samples.

Owner Acknowledgement:

I understand the Architectural Control Committee will act on this request as quickly as possible and I will be contacted in writing regarding the Committee's decision within thirty (30) days of their receipt of this request.

I agree not to begin any improvement without first receiving written approval from the Architectural Control Committee.

I understand it is my responsibility to comply with all established building codes and to ensure any required building permits are obtained after I receive Committee approval of this improvement request.

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Proposed Start-up Date for the Improvement

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Estimated Completion Date for the Improvement

**FOR ARCHITECTURAL CONTROL COMMITTEE USE:**

Date request received by the Committee: \_\_\_\_\_

Approved \_\_\_\_\_ Disapproved \_\_\_\_\_

Date: \_\_\_\_\_ Acc Committee Member \_\_\_\_\_

Date: \_\_\_\_\_ Acc Committee Member \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_