

# Request for Home & Lot Improvements

**RETURN REQUEST FORM AND REQUIRED MATERIALS TO:**

Parks of Dutchtown HOA  
ATTN: ACC  
P.O. Box 1048  
Prairieville, LA 70769

**Or turn in required documents to an ACC Member**

**OWNER'S NAME:** \_\_\_\_\_

**TENANT'S NAME** (if applicable): \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_

**PHONE**  
**HOME:** \_\_\_\_\_ **WORK:** \_\_\_\_\_ **FAX:** \_\_\_\_\_

**Please indicate and fully describe the improvement(s) which you propose.**

- |                                 |  |                                   |   |   |
|---------------------------------|--|-----------------------------------|---|---|
| <input type="checkbox"/> Paint  | <input type="checkbox"/> Roof            | <input type="checkbox"/> Pool/Spa | <input type="checkbox"/> Deck               | <input type="checkbox"/> Patio            |
| <input type="checkbox"/> Gazebo | <input type="checkbox"/> Storage<br>Shed | <input type="checkbox"/> Fence    | <input type="checkbox"/> Basketball<br>Goal | <input type="checkbox"/> Room<br>Addition |
| <input type="checkbox"/> Other: | _____                                    |                                   |   |   |

**Describe improvement which you marked above in more detail:**

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Attach drawing showing location of improvement(s) which you propose, backyard, sideyard, etc. Be specific, showing to scale the property lines, building set back lines, easements, fences, sidewalks, patios, pools. It is strongly recommended for all other improvements.

**Materials planned for the improvement you propose (Check all that apply):**

Lumber    Brick    Screen    Fence    Shingles  
 Other: \_\_\_\_\_

**Describe Type(s) Checked Above:**

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

If you are painting or staining, you **MUST** include paint/stain sample and brand/manufacturer. Please give particular consideration to the color of the brick when making your paint selection.

Brick Color: \_\_\_\_\_ Siding Color: \_\_\_\_\_

Shutter Color: \_\_\_\_\_ Front Door Color: \_\_\_\_\_

Trim Color: \_\_\_\_\_ Garage Door Color: \_\_\_\_\_

**Dimensions of Planned Improvement:** Width: \_\_\_\_\_ Height: \_\_\_\_\_ Length: \_\_\_\_\_

**Who will work on this improvement?**

Homeowner    Contractor   Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Start Date: \_\_\_\_\_ Expected Completion Date: \_\_\_\_\_

For any room additions and storage buildings, you must obtain a construction permit from the City and/or County within thirty (30) days of the date of approval by the Architectural Control Committee.

*DISCLAIMER: The Parks of Dutchtown Homeowners' Association Board of Directors and Architectural Control Committee (ACC) do not warrant or guarantee in any fashion, implied or expressed, any materials and/or construction methods used in any construction approved by the ACC whether or not the ACC specifies minimum standards for the materials. It is the sole responsibility of the lot owner to ascertain the existence and applicability of any warranty or guarantee from manufacturers, suppliers, and/or installation contractors.*

IN AN EFFORT TO PROVIDE AND PROTECT EACH INDIVIDUAL HOMEOWNER'S RIGHTS AND VALUES, IT IS REQUIRED THAT ANY HOMEOWNER OR GROUP OF HOMEOWNERS CONSIDERING IMPROVEMENT (EXAMPLES: EXTERIOR PAINT, PATIO COVERS, FENCES, SIDEWALKS, DECKS, ETC.) ON THEIR DEEDED PROPERTY OTHER THAN LANDSCAPING, SUBMIT A REQUEST FOR HOME IMPROVEMENT APPROVAL TO THE ARCHITECTURAL CONTROL COMMITTEE FOR APPROVAL BY THE HOMEOWNERS ASSOCIATION PRIOR TO INITIATING WORK ON PLANNED IMPROVEMENTS. IF ANY CHANGE IS MADE THAT HAS NOT BEEN APPROVED, THE COMMITTEE HAS THE RIGHT TO ASK THE HOMEOWNER TO REMOVE THE IMPROVEMENT FROM HIS PROPERTY.

I UNDERSTAND THAT THE ASSOCIATION ARCHITECTURAL CONTROL COMMITTEE WILL ACT ON THIS REQUEST AS QUICKLY AS POSSIBLE AND CONTACT ME IN WRITING REGARDING THEIR DECISIONS. I AGREE NOT TO BEGIN PROPERTY IMPROVEMENT(S) UNTIL THE ARCHITECTURAL CONTROL COMMITTEE NOTIFIES ME OF THEIR APPROVAL. I UNDERSTAND THAT THE COMMITTEE MAY ISSUE ITS WRITTEN APPROVAL OR DISAPPROVAL OF PLANS OR PROPOSALS SUBMITTED ANYTIME WITHIN THIRTY (30) DAYS AFTER SUBMISSION, AND THAT FAILURE OF THE COMMITTEE TO ACT UPON PROPERLY SUBMITTED PLANS OR PROPOSALS WITHIN THIRTY (30) DAYS OF SUBMISSION SHALL CONSTITUTE APPROVAL THEREOF.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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**For ACC use only**

Date Received: \_\_\_\_\_ Receiving Member's Name: \_\_\_\_\_

Approved     Denied     Conditionally Approved

**ACC signatures:**

\_\_\_\_\_ **Date:** \_\_\_\_\_

\_\_\_\_\_ **Date:** \_\_\_\_\_

\_\_\_\_\_ **Date:** \_\_\_\_\_

**Comments or contingencies from ACC:**

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