

# Spring Lake Estates Subdivision Homeowners Association, Inc.

Post Office Box 363, Trafalgar, IN 46181 317-494-0299

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## ARCHITECTURAL CONTROL COMMITTEE APPLICATION FOR CHANGE

Please Complete All Sections And Return The Original Application With Attachments  
Before Any Project Is Started To:

1. Application Date: \_\_\_\_\_ Lot #: \_\_\_\_\_

2. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Alternate Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

3. Describe the proposed change in detail including the dimensions: \_\_\_\_\_

4. Will there be changes or modifications in the utility services or existing structures to accommodate the proposed change? Please indicate below.

	Yes	No		Yes	No
Electric	_____	_____	Cable TV	_____	_____
Telephone	_____	_____	Exterior Walls	_____	_____
Gas	_____	_____	Patio Slab	_____	_____
Water	_____	_____	Sidewalks	_____	_____
Drainage	_____	_____	Deck	_____	_____
Sewage	_____	_____	Driveway	_____	_____

5. List the major construction materials that will be used in this project. Exterior materials (including roof shingle type and paint color) **must** conform to those used on the original structure or be sufficiently compatible. Be as specific as possible.

Fencing material: \_\_\_\_\_

Deck material: \_\_\_\_\_

Other material \_\_\_\_\_

6. Will the proposed project extend beyond the property Line? Yes \_\_\_\_\_ No \_\_\_\_\_

Will the proposed project infringe on the easement? Yes \_\_\_\_\_ No \_\_\_\_\_

Explanation: \_\_\_\_\_

**\*\* IMPORTANT \*\*** If the proposed project attaches to a neighbor's property, written permission from the neighbor **must** be attached to this application.

A. The project will be completed by: Homeowner \_\_\_\_\_  
 Contractor(s) \_\_\_\_\_  
 Both \_\_\_\_\_

B. List of Contractor(s) – use additional sheet if necessary.

\_\_\_\_\_  
 (Name) (Phone) (Contact Person)

C. Please indicate the time needed to complete the project after receiving the  
 ACC approval. \_\_\_\_\_

**Project must be completed within 90 days of approval. If project is not completed or started after 90 days, the original ACC approval will be void & homeowner must submit new acc form for approval.**

7. Attachments:

**Construction Specifications- A plot plan is required for all changes.** You may obtain one in Johnson County by calling the Department of Planning and Zoning at (County) 346-4350. In addition to the plot plan you must provide a blueprint or hand drawn layout of the property showing the existing structures and the intended changes. All dimensions must be shown and labeled. The homeowner is responsible for contacting “Call Before You Dig” at (800) 382-5544.

**Permits-** If your improvement project requires a City or County construction permit; those completed permits must be attached to this application.

**Warning-** It is the property owner’s responsibility to determine if the Government body (example: Town of Trafalgar or Johnson County) approval is required. Approval by the appropriate Government body does not relieve the owner of the responsibility to obtain an ACC approval nor does an ACC approval relieve the property owner of the responsibility to obtain a Government body approval.

**Easement-** Any change to the property that encroaches on the easement is the sole responsibility of the owner. **The City, County and any utility company has the right to remove your structure to perform work as needed without permission, without replacement, and without compensation to the property homeowner for any damage(s) done.**

**Note:** All original applications and attachments shall remain the property of the Association. You may wish to keep a copy for your personal records.

I, the Homeowner, hereby acknowledge that I have read and understand the guidelines for architectural improvements as stated in the Covenants for my Homeowner’s Association.

Homeowner’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(Homeowner – Do not write below this line)

\_\_\_\_\_ Application Approved \_\_\_\_\_ Application Disapproved Date: \_\_\_\_\_

Reason for Disapproval: \_\_\_\_\_

Board Member: \_\_\_\_\_ Board Member: \_\_\_\_\_

Board Member: \_\_\_\_\_ Board Member: \_\_\_\_\_

Board Member: \_\_\_\_\_