Lake Forest Homeowners Association, Inc.
Architectural Improvement Request – Shed Form

Homeowner: The completed Application (Request forms, drawings, photos, survey) must be sent either by regular or electronic mail to The Lake Forest Homeowners Association, Inc.

LFHOA

PO Box 7509 Victoria, TX 77903

LFHOA.0121@gmail.com

You will receive written notification from the Architectural Committee or LFHOA regarding whether or not your application has been approved.

Shed color must match the house. The roof must have 30 year "architectural" or "dimensional" shingles to match house. Roof may be either hip or gable only. No roll-up doors.

Minimum Guidelines for sheds:

- 4" cement foundation with minimum 12" beams, constructed with a minimum of type 2 cement with rebar.
- Studs must be on 16" centers.
- Rafters must be on 16" centers.
- Shed must be anchored with minimum ½"x 7" mechanical anchors OR ½"x 6" bent anchors every 30". Every corner must have 2 anchors. Doorway must have an anchor on either side.
- Hurricane ties must be installed on ceiling joists and rafters.
- Roof overhangs must be at least 6" boxed eaves.

Please complete the following:

Color_____

Width_____

Height_____

Depth_____

Construction Materials_____

Supplier_____

Contractor_____

Building Permit #_____

Location on Property_____

Please attach a survey indicating placement of improvement along with setback measurements. All sheds must be placed BEHIND the building line of the home.

Plans and specifications showing the nature, kind, shape, dimensions, materials and location of the improvement are to be attached to this application. The improvement is **not to be started** until approval is received from the Architectural Committee or the LFHOA in writing. If approved, I agree to build in accordance with this application and the attached plan(s) and specifications. I agree to maintain this and any other improvements at my expense.

Please allow up to 30 days for response

Homeowner signature_____ Date_____

For Architectural Committee Use Only

Date Received: _____   Inspected/Reviewed on _____

Approved: _____ Disapproved: _____ Date: _____

Comments: _____

Inspected/Reviewed by: _____

Inspected/Reviewed by: _____