CLEAR SF	RINGS PARK PROPERTY OWNER'S ASSOCIATION	
1	ARCHITECTURAL CONTROL COMMITTEE	
New Construction	N CHECKLIST FOR EVALUATION AND APPROVAL PROCESS	
Name(s) of Property Owner:		
Construction Site Address:	Phase Unit: Lot No	
Property Owner Cell Phone	Alternate #	
Property Owner Email addresses		
Builder	Contact Name	
Phone	Email address	
Planned start date -	ed start date Target date for completion	

projected delays. Confirm copy of deed restrictions to property owner and builder with evaluation/approval checklist. <u>Notice to property owner and builder</u> - Bexar County requires permits for land clearing, call 210-335-6700 for permit and information; for oak wilt prevention compliance, call 210-207-1111 for more information, <u>http://www.sanantonio.gov/DSD/Constructing/Tree.aspx</u>, Clear Springs Park is in the ETJ of the City of San Antonio.

New Construction Project - Type of Structure (check all applicable):

[] Main House Residence	[] Guest House
[] Detached Garage	[] Horse Barn
[] Carport	[] Outbuilding/Shed
[] Workshop	[] Well/Pump House
[] Swimming Pool	[] Fence
ſ	l Other		

Documents Submitted for Review:

- [] Site drawing showing all setback measurements as well as location of the proposed construction project, all other existing structures, driveways, parking areas, septic system, sprayer heads, water well, water storage containers, or any other structures not listed
- [] Construction Plans including floor plan, porches, elevations, roof and exterior materials to be used
- [] Written explanations
- [] Photographs
- [] Septic System Permit with supporting documentation and site drawing

[] Water Well Permit with supporting documentation and site drawing with location of the well and water storage containers Other _____

CONSTRUCTION PROJECT CHECKLIS	T – to be completed by builder; then used for review and approval by	ACC
1. Plans for construction are within	n setbacks as described in Deeds Restrictions and Covenants:	
[] Not nearer than 60 feet from the	e front line of the property	
[] Not nearer than 20 feet from the	e sides of the property	
[] For corner tracts, not nearer that	an 40 feet from the side along the street	
2. Plans for construction meet the 7 and Covenants. [] Yes	75% masonry requirement for building exteriors as noted in Deed Re	strictions
3. External materials to be used and	d described in plans are:	
[] Stucco	[] Rock	
[] Hardy-Board	[] Other:	
[] Brick		
[] Combination of those checked	Wood allowed only after 75% masonry requirement is met.	
Specify foundation materials for each	materials are concrete. [] Yes [] No ch structure type included in construction project – see above for str 	ucture type
	m the property, will be maintained, and within setbacks?	
[] Confirmed with Property Owne		
7. No temporary living quarters sha	Il be erected or moved onto the construction site.	
[] Confirmed with Property Owr	ner/Builder	
8. Is the water well permit obtained	d from the State of Texas and site plan submitted?	
[] Yes [] No	Copy of Water Well permit submitted? Yes or No	
9. Is the septic system permit obtain	ned from Bexar County and site plan submitted?	
[] Yes [] No	Copy of Septic System permit submitted? Yes or No	
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10. No structure is to be built or plac must be adhered to. [] Confirme	•	nent portions of the property. Setback building lines /Builder			
11. If variance(s) requested, describe and give details:					
*****	*****	*******			
I, (prope intent to comply fully with the speci		<i>printed),</i> have read the CSPPOA deed restrictions and property location. <i>Initial</i>			
Committee on my behalf concerning permits, drawings, specifications, an	pre-construction and control of the second sec	communicate with the CSPPOA Architectural Control construction site plans, Bexar County and State of Texas s of building my home. <i>Initial</i> DateDate			
Builder' Representative submitting p Print name					
Contact Telephone	Email	_ Signature Date			
For CSPPOA Board concerning any va	riance request				
If Variance(s) approved by CSPPOA Board of Directors: [] Yes [] No Signature and Title of Board Officer:					
Signature and Title of Board Officer:		Date:			
For ACC Documentation					
ACC Member Working with Owner/I	Builder:				
ate Review Initiated: Date All Necessary Documents Submitted:					
Date Project Approved:	Comments				
ACC NEW CONSTR	UCTION APPROVA	AL OF CONSTRUCTION PROJECT(S):			
Approved? []Yes []No If no	ot approved, give brief e	explanation:			
Signature of 1 st ACC Committee Men	Date				
Signature of 2 nd ACC Committee Member		Date			
Signature of Board President		Date			
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