

**Summit Estates at Fischer  
Architectural Control Committee Submittal Form**

**Driveways/Culverts - Extensions or Additional**

**Lot #** \_\_\_\_\_ **Street Address** \_\_\_\_\_

Legal Owners

Name(s): \_\_\_\_\_

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

Current Mailing Address: \_\_\_\_\_

Mobile Phone(s): \_\_\_\_\_

Builder: \_\_\_\_\_

Contact: \_\_\_\_\_

Mailing Address; \_\_\_\_\_

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

EMAIL: \_\_\_\_\_

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

**DESCRIPTION OF IMPROVEMENT OR CHANGE**

**REQUESTED:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

This form and supporting materials may be mailed or scanned to the ACC at the following addresses:

**Summit Estates Fischer ACC  
PO Box 93  
Fischer, TX 78623**

**Email To:  
summitstatesacc@outlook.com**

I understand that the Architectural Control Committee will act on this request as quickly as possible but no later than the 30 days allotted per the Deed Restrictions of receipt, and will contact me in writing regarding their decision. *Incomplete submissions that require follow-up*

*questions can increase the amount of time needed before a decision is made.* I agree not to begin property improvement without written approval from the ACC. I further understand and agree that all construction will meet the **Builders Requirements**.

_____	_____	_____
<b>Homeowner's Printed Name</b>	<b>Signature</b>	<b>Date</b>
_____	_____	_____
<b>Homeowner's Printed Name</b>	<b>Signature</b>	<b>Date</b>