THE WOODLANDS TOWNSHIP * THE WOODLANDS, TEXAS 77381 2801 Technology Forest Blvd * 281-210-3973 * Web site: www.thewoodlandstownship-tx.gov

		Legal description: Village LotBlkSec Address:	
2.1	Home Improvement	Owner:	
	Material	Phone (Res) :(Day):	
	(Siding)	Fax:Other phone:	
		E-mail:	
	Application Form	Estimated Start Date:	
		Contractor Company Name:	
		Contractor's Phone:	
		Contractor's Address:	
		Contractor's e-mail:	

HOW TO APPLY

- 1. Complete and sign this application.
- 2. Provide brochures, drawings, or photographs, and color samples.
- 3. All permits will be emailed. Homeowner email is required.
- 4. Please visit our web site to check the posted agendas of the Plan Review Committee meetings at http://www.thewoodlandstownship-tx.gov. Submission **does not** guarantee posting on the upcoming agenda.

	APPLICANT INFORMATION - PLEASE PROVIDE THE FOLLOWING:			
	Improvement type: Material			
For Material Change:	Siding type:	Color:	_	
	Other type:	Color:	_	

OWNER CERTIFICATION AND HOLD HARMLESS AGREEMENTS

2.1 Home Improvement Color/Material Permit #______page _____of____

Revised: January 22, 2014

- 2. The improvements will be completed in accordance with the approved application.
- 3. The improvements will not affect existing surface water flows at the lot boundaries.
- 4. Agents or employees of The Woodlands Township have my permission to enter the property during normal business hours.
- 5. Construction is not to begin until approval has been received from the Plan Review Committee

Owner understands that The Woodlands Township does not review plans for compliance with applicable laws or codes, and that it is the duty of the owner and the owner's contractors or consultants to design and construct the proposed improvements according to applicable laws, codes and sound practices. Owner hereby releases and agrees to hold The Woodlands Township, The Development Standards Committee, and their agents and employees harmless from any cost or liability arising out of the review or approval of plans for the proposed improvements.

Owner Signature	Date	Contractor Signature (optional)	Date
NOTE: Construc	ction must be comple	ted within 120 days of Plan Approval	
	(For Office	Use Only)	
Staff Approval Verification Date Int	Int		
Committee Astion		Consular and the Astrica	
Committee Action(date)		Supplemental Action(de	 ate)
Approved Conditionally Approved Disapproved	Deferred Returned	Approved Conditionally Approved	Deferred Returned

2.1 Home Improvement-Color/Material Revised: January 22, 2014

Permit # ______of _____of _____