

APPLICATION FOR MODIFICATIONS APPROVAL

DATE: _____ BLOCK/LOT: _____

TYPE OF MODIFICATIONS (circle all that apply):

**EXTERIOR COLOR/MATERIAL CHANGE
ARCHITECTURAL RENOVATION/ADDITION
LANDSCAPE RENOVATION/ADDITION**

PROPERTY OWNER(S): _____

ADDRESS: _____

CITY, STATE, ZIP: _____

TELEPHONE: _____ **FAX:** _____

E-MAIL ADDRESS: _____

CONTRACTOR: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

TELEPHONE: _____ **FAX:** _____

E-MAIL ADDRESS: _____

LICENSE NO. _____

ARCHITECT: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

TELEPHONE: _____ **FAX:** _____

E-MAIL ADDRESS: _____

OWNER(S)

CONTRACTOR

ARB

APPLICATION FOR MODIFICATIONS APPROVAL (CONTINUED)

APPLICATION CHECKLIST:

Applicable items described on the Final Plan Review Checklist of Materials must be approved by the ARB, and the Modifications Review Fee and the Compliance Deposit (if any) must be received, prior to receiving approval for modifications.

CONSTRUCTION DOCUMENTS:

A complete set of construction documents must be submitted to the ARB for review. All exterior modifications to elevations, landscape, and floor plans, etc. must be documented and added to the home site record with the ARB:

Site Plan
Building Elevations
Floor Plan

Overlay of Existing and Proposed Conditions
Landscape Plans (if applicable)

MATERIALS SAMPLES:

One set of material samples must be submitted to the ARB for review.

Color Change:

Existing: Color Name, Designation #, Manufacturer

Proposed: Color Name, Designation #, Manufacturer

Material Change:

Existing: Type, Color, Manufacturer

Proposed: Type, Color, Manufacturer

Detailed description of change/addition (include size, height, location, etc.):

Additional heated square footage, if any: _____

Review Fee
Amount: \$ _____
Date Received: _____
Received by: _____
Check No. _____

Compliance Deposit, if applicable
Amount: \$ _____
Paid by: _____
Date Received: _____
Received by: _____
Check No. _____

Date of Commencement: _____ **Date of Completion:** _____

Modifications Review Fee
Amount: \$ _____
Date Received: _____
Received by: _____
Check No. _____

OWNER(S)

CONTRACTOR

ARB

Dated: _____

Signature of Owner or Authorized Agent

****SUNSET COVE ARCHITECTURAL REVIEW BOARD ONLY****

OWNER(S): _____

BLOCK/LOT: _____

DATE RECEIVED: _____

The ARB reviewed the Application for Modifications Approval, and rendered the following decision:

(Check One)

APPROVED: _____

APPROVED WITH LIMITING CONDITIONS (Attached): _____

DENIED: _____

COMMENTS (Recommendations):

LIMITING CONDITIONS (Binding Provisions):

Dated: _____

ARB Representative

OWNER(S)

CONTRACTOR

ARB

BUILDER APPLICATION: 1 OF 5

BACKGROUND

| | |
|---|--|
| Company Name: | |
| Trade Name (if any): | |
| Parent Company (if any): | |
| Street Address: | |
| City, State, Zip: | |
| Telephone: | |
| Fax: | |
| Email: | |
| Web Address: | |
| Type of Company ("C" Corp, LLC, "S" Corp, Partnership, LLP, Other): | |
| State of Incorporation/Registration: | |
| Year Founded: | |

OFFICERS & DIRECTORS

Please list all officers, directors and/or partners of the corporation or partnership (Use additional pages if necessary.)

| Title | Name and Address | Percent of Ownership |
|-------|------------------|----------------------|
| | | |
| | | |
| | | |
| | | |

LOCAL MANAGEMENT TEAM

Please list key members of the local management team not shown under "Officers & Directors"

| Title | Name and Address | Years with Company |
|-------|------------------|--------------------|
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OWNER(S)

CONTRACTOR

ARB

BUILDER APPLICATION: 2 OF 5

| | |
|----------------------|--|
| Company Name: | |
|----------------------|--|

TRADE CONTRACTOR & SUPPLIER REFERENCES

| Sub/Supplier | Company Name | Contact | Telephone |
|--------------|--------------|---------|-----------|
| Electrical | | | |
| Plumbing | | | |
| Drywall | | | |
| Carpentry | | | |
| HVAC | | | |
| Lumber | | | |
| Concrete | | | |

Misc.

FINANCIAL REFERENCES

Please list the financial institutions utilized by the company. List the checking accounts and lending institutions in the appropriate places and include other financial institutions with which you do business.

| Financial Institution | Lender | Contact | Telephone |
|-----------------------|-------------------|---------|-----------|
| | Checking Accounts | | |
| | Lender | | |
| | | | |

AWARDS

Please list any awards, citations and special recognition received by the company

| Name of Award | Received From | Year Received |
|---------------|---------------|---------------|
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OWNER(S)

CONTRACTOR

ARB

COMPANY NAME

SALES AND CONSTRUCTION ACTIVITY

Please complete this sheet for all current construction activity in the Galveston area.

| Community | Location | Product Type | Current Activity | | | | AC Sq. Ft. Range | | Price Range | |
|-----------|----------|--------------|--------------------|---------------------------|-------------------------------|-------|------------------|------|-------------|------|
| | | | Builder Lots | | Active Construction Contracts | Total | Low | High | Low | High |
| | | | Sold & Not Started | Sold & Under Construction | | | | | | |
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For construction contracts on owner lots, please include the approximate value of the homestead.

CUSTOMER REFERENCES

Please provide information requested on the past 5 consecutive closings or completed construction contracts.

| Customer | Community | Location | Product Type | Closing or Completion Date | Home Telephone |
|----------|-----------|----------|--------------|----------------------------|----------------|
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OWNER(S)

CONTRACTOR

ARB

| BUILDER APPLICATION: 4 OF 5 | |
|---|--|
| COMPANY NAME | |
| GENERAL INFORMATION | |
| Is the company organized under the laws of the State of Texas (yes or no)? | |
| If "no", is the company qualified to do business in the State of Texas (yes or no)? | |
| How many full-time personnel are employed by the company? | |
| Is the company a member of NAHB or any other industry-related organization? | |
| How many years has the company's chief executive officer controlled a home building company? | |
| Name the parent company, if applicable | |
| Name any subsidiary companies, if applicable | |
| For the remaining questions below, "company" shall be defined to include the applicant company as well as all entities listed in the three(3) inquiries immediately above. | |
| Is the company or any of its officers, directors, partners or principals in default of any loans or involved in any type of foreclosure proceedings (yes or no)? | |
| Has the company ever given any deeds in lieu of foreclosure (yes or no)? | |
| Has the company or any of its officers, directors, partners or principals ever filed bankruptcy or been adjudicated as bankrupt within the past seven years (yes or no)? | |
| Are there currently tax liens, mechanics liens, materialmen's liens, or other liens filed of record against Builder arising out of the operation of Builder's business? If "yes", please attach a description of each such legal action in detail | |
| Is Builder currently a defendant in any lawsuit or other legal action relating to Builder's construction activities (yes or no)? If "yes", please attach a description of each such legal action in detail. | |
| Have any complaints been filed against Builder with the Better Business Bureau, Bureau of Consumer Protection or any other consumer agency (yes or no)? If "yes", please attach a description of each such complaint in detail | |

OWNER(S)

CONTRACTOR

ARB

BUILDER APPLICATION: 5 OF 5

SUBMITTED AND CERTIFIED BY

As an authorized agent of the company, the undersigned submits the above information and attachments as being true and correct, and authorizes Sunbird Development, LP, and all affiliated entities (collectively "Developer") and their designated agents to utilize such information, obtain financial and credit information, and make investigations concerning the company and its officers, directors, partners and principals as may be deemed necessary in its sole discretion. The company and undersigned agent agree to indemnify, defend and hold harmless Developer and their designated agents for any costs, damages or liability arising from any such investigation. The undersigned, on behalf of the company agrees to inform Developer of any changes to the above information within five calendar days of such change and acknowledge that my failure to provide correct and complete information may result in the ARB denying my application and prohibiting the company from engaging in any construction activities within Sunset Cove

PLEASE ATTACH:

1. Company brochure, history and background
2. Copy of Builder's limited warranty to be used at Sunset Cove
3. Copy of Builder's license
4. Copies of Builder's commercial general liability insurance, worker's compensation and builder's risk insurance

SIGNATURE:

OWNER(S)

CONTRACTOR

ARB