

2.2

Air Conditioning Unit

Application Form

Legal description: Village ____ Sec ____ Blk ____ Lot ____
 Address: _____
 Owner: _____
 Phone (Res): _____ (Day): _____
 Fax: _____ Other phone: _____
 Email: _____
 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. (Refer to the Compliance Deposit/Inspection Schedule).
2. Provide brochures, drawings or photographs and color samples.
3. Attach a scaled copy of the property survey noting the location of the proposed improvement, also to scale. If the survey is greater than 11"x17" a digital copy must be submitted.
4. All permits will be emailed. Homeowner email required.
5. Please visit our web site to check the posted agendas of the Plan Review Committee meetings at thewoodlandstowship-tx.gov. Submission **does not** guarantee posting on the upcoming agenda.

APPLICANT INFORMATION - PLEASE PROVIDE THE FOLLOWING:	
	Are any trees over 6 inches in diameter as measured 2 feet from the ground proposed for removal? (yes/no) If yes, how many? _____ Please indicate the location of the trees on the property survey.
	Air Condition Unit Specifications: Type of Unit: window units, ground mounted compressor, other _____. Size of unit: length _____ width _____ height _____ tons _____ Color: _____ Number of units existing: _____ Type: _____ Number of units proposed: _____ Type: _____ Total: _____
	Where will the unit be located? Describe: _____
	If a window unit is proposed, what is the installed height above grade? _____ ft. How will the window unit be screened from view? _____
	How will they be screened from view? Please explain: _____
	Will there be additional hard wiring for electricity? (yes/no) Plumbing? (yes/no)
	What is the existing Living Area of your home? _____ sq. ft.

OWNER CERTIFICATION AND HOLD HARMLESS AGREEMENT

1. The information set out above and included with this Application is accurate and complete.
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/Installation of the project specified in this application, may not begin until the action by the Plan Review Committee is granted and a permit has been issued by The Woodlands Township's Covenant Administration Department.

Owner understands that the 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: Construction must be completed within 120 days of Plan Approval

(For Office Use Only)

Staff Action

Date _____ Int. _____ Int. _____

Committee Action _____
(date)

____ Approved _____ Deferred
 _____ Conditionally Approved _____ Returned
 _____ Disapproved

Supplemental Action _____
(date)

____ Approved _____ Deferred
 _____ Conditionally Approved _____ Disapproved

