

**APPLICATION FOR PROPERTY IMPROVEMENT
EXTERIOR PAINT & ROOFING**



Owner Name(s)			
Address		Phone No.	
Email Address			

Request Type **Paint** **Roof** **Both Paint & Roof**
 (Check One)

PAINT

***Please Note: The book of approved paint schemes may be found at the clubhouse*

Paint Scheme No.		Soffit Color	Choose 1: <input type="checkbox"/> White or <input type="checkbox"/> Trim
Base Color		Fascia Color	Choose 1: <input type="checkbox"/> White or <input type="checkbox"/> Trim
Trim Color		Gutters	Choose 1: <input type="checkbox"/> White or <input type="checkbox"/> Trim
Front Door Color		Downspouts	Choose 1: <input type="checkbox"/> White or <input type="checkbox"/> Trim

****Garage doors can only be the color of the base or trim *** If shutters exist they must be the same color as the front door color****

ROOF

***Please Note: Shingle style should be architectural/dimensional*

Shingle Color & Style	
Shingle Brand/Manufacturer	
Shingle Warranty (YEARS)	

Owner Signature		Date	
Estimated Work Completion Date			

FOR BOARD USE ONLY ACTION OF ARCHITECTURAL COMMITTEE

Recommend Approval Recommend Disapproval Need More Information

_____ *Date* _____
Architectural Committee Chairperson

<u>COMPLIANCE CONFIRMED AND CLEARED</u>	<u>(YES or NO)</u>	<u>COMMITTEE ACTION OFFICER</u>	<u>DATE</u>