

Send Application to: 2430 US HWY 27 Suite 330, -234 Clermont, FL 34714 or Email to: info@abcmanagementfl.net

## **Exterior Paint Change Form**

Name:		Pl	none:	Cell:	
Property Address:	Email:				
Mailing Address:					
HOA Color Book Scheme Nu	ımber (if Applicable):				
	or are not approved by y	our Board of Directors. If not	• =	lors are not an approved color so me Number, or if your communi	
	Main Body Color  Place Paint Sample Here	Trim Color  Place Paint Sample Here	Front Door Color Place Paint Sample Here	Garage Door Color Place Paint Sample Here	
	Color Name	Color Name	Color Name	Color Name	
	Color Code	Color Code	Color Code	Color Code	
	Brand	Brand	Brand	Brand	
provided as requested, the	30 days the Association lithin 90 days of your writ	nas to respond to my request tten approval, the Architectu	will reset until the time tha	II result in legal action, If all infor t ALL information is provided. If be resubmitted for approval. Ple	the approved
Signature:		Date:			
		DO NOT WRITE BEL	OW THIS LINE		
This Application is hereby:	□Approved	□Denied 	Date:		
Comments:					
Dates: Received by Owner:_		Forward to Board:	Return	ed to Owner:	