

## ARCHITECTURAL REQUEST FORM – PAINT ONLY

The Association documents require that before making any paint changes to your house, you must first submit an Architectural Request form to the property manager, Chris Blake ([chris@csshoamgt.com](mailto:chris@csshoamgt.com)) to forward to the Architectural Review Committee. The person requesting painting approval is responsible for providing all information necessary to render a decision. An incomplete/inaccurate form will be denied. Any changes to a request will require the submission of a new form for review.

**Paint chosen from the approved color list below will process quickly. A review of a paint color that is not listed below may take up to five (5) days.**

General requirements are:

All columns, trim, soffits, gutters, are to be painted **Pure White Semi-Gloss or Gloss**. All garage door handles are to be **Tricorn Black Semi-Gloss or Gloss**. Garage doors that have windows must paint the trim and crossbars the same color as the garage doors.

HOA APPROVED PAINT COLORS:

The paint colors listed below are all Sherwin Williams. However, matching colors can be purchased at several different paint stores. A UV protection paint is recommended for our southern climate to help reduce fading. **A Semi-Gloss or Gloss paint finish is required for ALL COLORS.**

SW 6258 Tricorn Black	SW 7615 Sea Serpent	SW 7595 Sommelier
SW 7005 Pure White	SW 6216 Jasper	SW 7020 Black Fox
SW 7555 Patience	SW 7026 Griffin	SW 7674 Peppercorn
SW 6207 Retreat	SW 6237 Dark Night	SW 6187 Rosemary
SW 5141 Softer Tan	SW 9101 Tres Naturale	SW 9086 Cool Beige

Front Door # \_\_\_\_\_ Garage Door # \_\_\_\_\_ Shutters # \_\_\_\_\_

Holly Glen Estates Homeowners Association, Inc.

Homeowner: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ email: \_\_\_\_\_

Desired Start Date: \_\_\_\_\_ Anticipated Completion Date: \_\_\_\_\_

I certify that I have read the above Architectural Request Form and agree that I will abide by same.

Homeowner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Community Solutions Southeast, LLC:

Date mailed to Committee: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_