Change of Exterior Color Application

Date:________________

Lot Owner Name: ____

Address: ____ **Lot Number:_________**

Lot Owner Phone Number: _______-________-____________

Lot Owner E-mail: ____

Review Fee Check # _______________

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Area(s) to be repainted:

Home:

Paint Brand Name: ____

Paint Color Name: ____

Paint Color Number: ____

Shutters:

Paint Brand Name: ____

Paint Color Name: ____

Paint Color Number: ____

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I have submitted the above color(s) for approval from the Reunion Architectural Review Committee. I understand that I must comply with the comments and/or changes made by the Reunion ARC.

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Lot Owner Signature