

**STARLIGHT RIDGE SOUTH ARCHITECTURAL COMMITTEE
HOME REPAINTING CONTRACT
APPLICATION SUPPLEMENT**

Date: _____

Name: _____

Site Address: _____

1. (Primary Color, Wood Siding):

(Write in Color Name/Formula)

The primary color shall be used on all wooden exterior walls such as wood siding/shingles and garage doors.

2. (Stucco):

(Write in Color Name/Formula)

This color is to be applied to stucco walls. The stucco color is provided for additional variety and may be applied to lighten the overall effect when a dark color is chosen for the primary wall color.

3. (Secondary Color, Wood Trim):

(Write in Color Name/Formula)

Secondary colors shall be used on any element of wood trim that occurs at a corner or edge of building, including corner boards, fascia, window and door surrounds, including garage door trim, exposed rafter tails, or other exposed beams, chimney cap and patio covers.

4. (Accent):

(Write in Color Name/Formula Above)

This color is for restricted application and intended only to highlight special features of the house. In no case to be applied to the primary wall surfaces. The accent can be used on front doors, door frames, door and window surrounds and window mullions (a vertical dividing bar, as between windowpanes).

Owner Signature: _____

ADJACENT AND IMPACTED HOMEOWNER STATEMENT

On _____, 20____, I notified the persons listed below of my intent to submit plans to the Architectural Control Committee for approval. I agree to make these plans available to these homeowners for review, including those that adjoin at the rear of my property.

Signature of Submitting Owner: _____

Please Print or Type Name Here: _____

Address: _____

Neighbor Address:	Print or Type Name	Neighbor Signature
_____	_____	_____
_____	_____	_____
_____	_____	_____

For Committee Use Only

Committee Member Decisions:

Member (Print Name)	Signature	Decision [Approve (A), Disapproved (D)]
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Conditions/Comments:

