

Paint Alteration Application

Name of Color
Color #
Trim Color

Name of Color
Color #
Door Color

Name of Color
Color #
House Color

Homeowners

Name: _____
Address: _____
Village: _____
Phone: _____
E-Mail: _____

Official Use Only

Application Date: _____

Approve: _____

Disapprove: _____

Oakstead Homeowners Association

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