

APPLICATION FOR REPAINTING

To the Shadow Run Homeowner's Association Architectural Control Committee

NO APPLICATION will be reviewed without complete information and/or plans provided. Please read the instructions carefully in order to avoid unnecessary delay in processing and timely review. *All requests should be submitted as soon as possible on this form for review.* **Please allow up to a maximum of 30 days.** THANK YOU!

1. NAME: _____
ADDRESS: _____
PHONE: HOME _____ WORK _____ Email: _____
2. A) Description of proposed work:

PAINT/REPAINT- **Please attach STORE PROVIDED paint CHIP samples of ALL colors desired.**
Please write on each paint chip its intended use:
(house color, trim, door color, etc.)

If painting FENCE: (Must be 6' cedar with dog-eared ends): _____

3. Estimated start date (within 6 months of approval): _____ Completion date (within 6 months of approval): _____
4. PROPERTY OWNER: hereby agrees to give written notification to surrounding/affected property owners who may be affected by this construction/remodeling proposed above, within 15 days after submittal date above. Property Owner above is aware that the ACC reserves the right to talk with surrounding property owners, if the ACC deems it necessary.
5. ACKNOWLEDGEMENT OF APPLICANT: I have read and acknowledge the Architectural Controls and Covenants (as outlined in the CCR's of record for Shadow Run) and the ACC Rules and Guidelines, which govern the procedures for undertaking my addition and/or alteration to my property.

Owner's signature: _____ Date: _____

FOR ACC USE ONLY: APPROVED DISAPPROVED Date: _____

Conditions of Approval: _____

COMMENTS: _____

Initials of ACC Members: _____ / _____ / _____ / _____

Association mailing address: Shadow Run H.O.A., PO Box 6388, Kennewick, WA 99336
Questions???? Please call: (509) 430-3151
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