

Paint Color Application

Owner/Applicant Information

Date Filed: _____ Owner/Applicant Name(s): _____

Address: _____ Coral Springs, FL _____
ZIP CODE

Telephone: _____ E-mail: _____

Subdivision/Complex Name: _____

Owner/Applicant's Signature: _____

Homeowner Association? Yes No **If Yes, please consult with your HOA for their approval.**

CHECK ONE:

- SINGLE FAMILY SEMI-ATTACHED *MULTI-FAMILY
 DUPLEX THREE & FOURPLEX *COMMERCIAL/INDUSTRIAL

*For Existing Multi-Family, Commercial and Industrial buildings, photographs (in JPEG file) of the building and any adjacent buildings are required with the application submittal.

PAINT COLORS

Paint Distribution	City's Paint Code (Example: 70YR 57/070)	Your Paint Brand Name (Example: Sherwin-Williams)	Your Paint Brand Code and Color Name (Example: SW6099 Sand Dollar)
Base Color			
Secondary (Max. 25% of wall surface)			
Trim (Contrast with base)			
Roofs			
Wall			
Garage Door			
Front Door			
Other: _____			

If you're hiring someone to do the work:

Company Name: _____ Telephone: _____

Contractor's Name (print): _____

PAINTING SHALL BE COMPLETED WITHIN SIXTY (60) DAYS FROM APPROVAL DATE

(Office Use Only)

Community Development Approval:

Approved by: _____ Date: _____