ANCALA HOMEOWNERS ASSOCIATION APPLICATION FOR REPAINT OF EXISTING HOME

Phone: (480) 661-1066 • email: execdir@ancalahoa.org

Please submit form by email or to Main Entrance Guard House

Date:				
Owner Name:				
Lot #:	_Address:			
Phone:	E-mail address:			
Painting Contractor: _	Phone:			
New Paint Color:	Base:		LRV:	
	Trim:		LRV:	
Provide the paint color name and manufacturer number along with the light reflectance value (LRV) for each color above. The LRV for Ancala North, East, and West is 40 and below. The LRV for Ancala is 60 or below.				
Provide a 4x4 foot sample on the street side of your home and attach a color swatch sample to application.				
☐ Provide a current p	noto of your home.			
The undersigned Owner understands that the Painting Contractor cannot stage the work in the street.				
Disclaimer: No member o Managing Agent shall be a with the rules and regulat	responsible in any way	for any defects in any p		tee, Board of Directors or ions submitted in accordance
Homeowner Signature:			Date	:
"Office Use Only" The Above Described Architectural Change Has Been				

_____Approved subject to the following condition(s):

_____ Approved

_Disapproved