

SKYBREAK

Color Review Form

Submittal Date _____

Submitted By: _____

Phone _____ Email _____

Subject Property Address _____

Legal Description: Lot _____ Block _____

Exterior Palette Selection (from Skybreak Design Requirements Paint Exhibit Sheets) _____

ADDITIONAL INFORMATION:

Exterior Body Paint Color: Manufacturer _____ Color _____

Accent Material (if applicable): Manufacturer _____ Product/Color _____

Trim Paint Color: Manufacturer _____ Product/Color _____

Fascia Paint Color: Manufacturer _____ Product/Color _____

Roof Shingle Color _____ Metal Roof Color _____

Window Frame Color _____ Front Door Color _____

Garage Door: Brand _____ Product/Color _____

Brick/Stone: Manufacturer _____ Product/Color _____

Stucco: Manufacturer _____ Color _____

Owner's Signature _____

Architectural Review Committee Notes:

____ Approved

____ Approved With Notes

____ Denied

Reviewer's Signature _____ Date _____