

**Architectural Form** (for Painting/Home Repair/Construction)  
*For the Brookfield West Homeowners Association*  
 (Alternate forms are available for external devices/telecommunications and landscaping)

**Fill out all information completely**

<b>Date:</b>	
<b>Owner's Full Name:</b>	
<b>Address:</b>	
<b>Contractor's Name, Address, Phone and License # if applicable</b>	
<b>Description of work to be done</b>	
<b>Type of material to be used</b>	
<b>Colors to be used</b>	
<b>Other Information</b>	

**FOR PAINTING/HOME REPAIR:** Please indicate which color(s) will be used on the main part of the house and which color(s) will be used on the trim. A sample of each color of paint must be attached.

If you will be replacing trim or siding, or patching stucco, or doing any kind of outside repair to the house, include a description of the work to be done along with a complete listing of the materials to be used. An accurate drawing showing the exact location of repairs to be made must be attached.

**FOR CONSTRUCTION:** An accurate drawing must be attached using your lot dimensions, showing the exact location of the proposed structure. For anything that must tie into the roofline, an evaluation of the proposed structure must also be attached.

Architectural requests will be reviewed as soon as possible. All requests will either be approved, denied or returned for additional information as soon as possible after review. **WORK CANNOT BEGIN UNTIL A WRITTEN APPROVAL IS RECEIVED!**

By signing I acknowledge that the information I am providing is accurate and will abide by all specifications I have provided above.

**HOMEOWNERS SIGNATURE X** \_\_\_\_\_ Date: \_\_\_\_\_

**Committee Action Taken**

*CONTACT MUTUAL MANAGEMENT WITH ANY QUESTIONS: (602) 248-4466*

For Office Services Use:

DATE ORDER RECEIVED: \_\_\_\_\_ DATE ORDER FILLED: \_\_\_\_\_