## Hampton Village Owners Association 2200 Douglas Boulevard, Suite 130A, Roseville, CA 95661 (916) 784-6605

## ARCHITECTURAL CONTROL COMMITTEE REQUEST FORM **HOUSE PAINTING**

<b>Instructions for Completion:</b> The Owner will (1) co	omplete and sign this request form and (2) obtain
Kelly-Moore Paint formulas for colors indicated.	
Owner	
Property Address	Phone
Authorized Kelly-Moore Paint Colors: (Complete	either "A" or "B" color scheme on your selection
from the color palettes).	·
Color Scheme "A"	Color Scheme "B"
Siding Color:	Siding Color:
Trim/Gutter Color*:	Trim/Gutter Color*:
Door Color:	Door Color:
*Downspouts must be painted to match portion of house to which they are affixed. Fascia must be painted the trim color of the selected color scheme.	*Downspouts must be painted to match portion of house to which they are affixed. Fascia must be painted the trim color of the selected color scheme.
Conditions of Approval: Kelly-Moore Paint is the coin Hampton Village. Hampton Village residents may account number 213-HA6605. Approval is subject to	obtain a discount by utilizing the Hampton Village
Signature of Owner	Date
To be completed by the Architectural Control Comm	ittee (ACC):
The Hampton Village Architectural Control Commit	tee has reviewed your application and has:
☐ Approved ☐ Tentative Appro	oval – Pending receipt of, subject to the following:
□ Disapproved	

ACC Representative

ACC Representative

ACC Representative

## **Hampton Village Owners Association**

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## **INDEMNITY AGREEMENT**

I (We), as owner (and co-owner) have read and understand the CC&R's and hereby agree(s) to indemnify, defend and hold harmless the **Hampton Village Owners Association**, its officers, agents, and employees, against any claims, expenses, losses, damage, including Attorney's fees, arising out of the my/our contractor(s), his sub-contractors, agents, employees, and assignees, occurring during construction of or related on any way the work of improvements on my lot(s) within the Hampton Village subdivision. The defense obligation stated above shall be with counsel of the Association's choice.

Please describe improvement(s) to be done	e:	
Owner	Property Address	
Date		