

**ABERDEEN HOMEOWNERS ASSOCIATION  
ARCHITECTURAL REVIEW FORM**

**Request for Exterior Modifications**

(Please remember an approval must be issued BEFORE work can be done.)

**Date:** \_\_\_\_\_ **Expected Completion Date:** \_\_\_\_\_

**Homeowners Name(s):** \_\_\_\_\_

**Property Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**TYPE OF REQUEST - (One Request Per Form)**

**Exterior Painting** \_\_\_\_\_ Please attach completed "House Painting Supplement"  
(Not required if painting the same color)

**Perimeter Fencing** \_\_\_\_\_ Please submit a copy of plot survey with fence placement  
indicated. Must show side door, window and joining fences. (All  
finished sides of fence must face outwards)

**Addition of  
Pool/Screen Room** \_\_\_\_\_ Please submit a copy of survey with pool and deck design.  
Screen rooms - please show height - not to exceed roof line.

**Other:** \_\_\_\_\_  
\_\_\_\_\_

**\*Please remember that permission must be received prior to beginning any work. The homeowner is responsible for compliance of contractors to abide by the Association Rules and County permits.**

**\*Any and all supporting documents such as city, county or state permits, plot maps, surveys, paint samples and ectara must be submit with your Architectural Application in order to be reviewed for Approval.**

**For Association Use Only:** \_\_\_\_\_ **APPROVED** \_\_\_\_\_ **NOT APPROVED**

**ARC or Board Member:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Board President:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Stipulation or Comments:** \_\_\_\_\_  
\_\_\_\_\_

**Please Return to Ameri-Tech Community Management, Inc.,  
5434 Grand Blvd. New Port Richey, FL 34652  
Or E-mail to [andrewg@ameritechmail.com](mailto:andrewg@ameritechmail.com)**

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**House Painting Supplement**

Please note that exterior colors that in the opinion of the ARC (Architectural Review Committee) would be discordant to the appearance of Aberdeen shall not be permitted. Bright color will not be approved. **Paint colors cannot match the colors of your neighbors on either side of your home.**

You must submit **three (3)** photos with your request. One (1) of your home, one (1) of the houses to the left and one (1) of the house to the right.

**Please note and respond to the following:**

Provide color samples as they relate to the areas to be painted, as described in items #1, #2 and #3 below.

<b>#1 - Main House Area</b>	Color to be used on exterior walls including gable ends and garage doors. This color may have a flat or satin finish.
<b>#2 - Trim Areas</b>	(Please circle any structures that will be painted) - Color for gutters, fascia and soffit. Include painted gable ends and trim around garage door(s), entry door(s), windows, and corner trim. This color may have a flat, satin or semi-gloss finish.
<b>#3- Accent Areas</b>	(Please circle structures that will be painted) Color for fascia, shutters and entry door(s), trim around garage door(s) and windows. This color may have a flat, satin or semi-gloss finish.

Area	Name of Color	Finish (flat, satin, semi- loss)	*Manufacturer Name and Number	Place Sample Here
#1 Main House Area				
#2 Trim Areas				
#3 Accent Areas				

**\*Most paint manufacturers include a paint ID number on their color samples. Please provide this number whenever possible**

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