

**WOODS WALK HOMEOWNERS' ASSOCIATION, INC.**

c/o GRS Community Management

3900 Woodlake Blvd., Suite 309 Lake Worth, FL 33463

Tel: 561-641-8554 Fax: 561-641-9448 -Vnavarro@grsmgt.com

ARB Chair [arb@woodswalkhoa.com](mailto:arb@woodswalkhoa.com)

**ARB PAINTING APPROVAL FORM**

Owner's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Lot: \_\_\_\_\_

Contact Phone No.: \_\_\_\_\_

Email: \_\_\_\_\_

**PROCEDURES**

- 1) [Fill in this form and return to address above or residentservices@grsmgt.com](mailto:residentservices@grsmgt.com)
- 2) All colors must conform to Woods Walk ARB guidelines.
- 3) This application expires in ninety (90) days.
- 4) A color chip must be supplied for each color selected. Three colors max.
- 5) Notify GRS or ARB when work is completed.

Area	Color Name	Approved	Denied
House Body			
Wood Trim			
House Bands			
Front Door			
Garage Door			

Reason for Denial: \_\_\_\_\_

.....**For ARB use only**.....

Date Received by GRS: \_\_\_\_\_

Date Received by ARB: \_\_\_\_\_

Approved ( ) Denied ( )

Explanation for Denial: \_\_\_\_\_

Committee Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Committee Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Committee Signature: \_\_\_\_\_

Date: \_\_\_\_\_