

Paint Request Form

Resident Name: _____

Address: _____

Rooms/Area to be painted *(kitchen and bathrooms are not to be painted):*

I have elected to paint according to guidelines in:

Option A: Approved Color Palette - Painting Guidelines

COLOR OF PAINT TO BE USED (MAXIMUM OF TWO)	COLOR	BRAND	STOCK #	FINISH	
	<input type="checkbox"/>	Garden Stone Gray	PPG	201558	Eggshell
	<input type="checkbox"/>	Linen White	PPG	201227	Semi-Gloss
	<input type="checkbox"/>	Latte Tan	PPG	201378	Semi-Gloss
	<input type="checkbox"/>	Grassland Green	PPG	201379	Semi-Gloss

PPG Paints Store is located at: 2208 Wilma Rudolph Blvd, Clarksville, TN 37040

Option B: Colors and Finishes NOT in the Approved Palette

I understand and agree that painting will be completed following the guidelines of the Interior Paint Policy. If I have chosen to use a color or finish not included in the Approved Color Palette, it is my responsibility to prime the painted walls with prior to move out or pay a charge of \$00.35 per square foot of painted wall space, payable upon move out. This charge will cover the cost of supplies and labor to restore the walls to their original condition. If I have chosen to paint using an approved color and finish and have followed the Interior Paint Policy, I may leave the painted wall(s) as-is at move out. Any damage or paint on any fixture, such as carpet, doors, windows, tile, blinds or any other fixtures would be considered damage.

Resident Signature: _____ Date: _____

 Approval is granted to perform painting at this house _____
Campbell Crossing Representative
 Your request is disapproved _____
Campbell Crossing Representative

Reason for disapproval: _____