

APPROVED FINAL COLOR FORM

Cassique Architectural Review Board • 7 Beachwalker Drive, Building #8 • Kiawah Island, SC 29455 • 843-768-3419 • 843-768-0517 (fax)

Address of Project _____

Owner _____ **Architect** _____

Address _____ **Address** _____

_____ **Zip** _____ _____ **Zip** _____

Telephone _____ **Fax** _____ **Telephone** _____ **Fax** _____

FOUNDATION MATERIAL _____

Color Name/Number _____ **Manufacturer** _____

List brick and mortar information if applicable.

SIDING MATERIAL _____

Color Name/Number _____ **Manufacturer** _____

TRIM MATERIAL _____

Color Name/Number _____ **Manufacturer** _____

WINDOWS _____

Color Name/Number _____ **Manufacturer** _____

GARAGE DOOR _____

Color Name/Number _____ **Manufacturer** _____

FRONT DOOR _____

Color Name/Number _____ **Manufacturer** _____

ROOFING MATERIAL _____

Color Name/Number _____ **Manufacturer** _____

SHUTTERS _____

Color Name/Number _____ **Manufacturer** _____

LOUVERS / LATTICE _____

Color Name/Number _____ **Manufacturer** _____

DECKING / STAIRS _____

Color Name/Number _____ **Manufacturer** _____

ARB ACTION Approved _____ Disapproved _____