Brookwood Homeowner's Association, Inc.

Shed Approval Form

This form must be completed in full. Scan and email to: BrookwoodSub@msn.com

Date:	Preferred Contact N	lumber:	
Homeowner's Name:			
Address:			
Estimated Start Date:			
Shed must match home exactly:			
*Roof pitch (no less than 5/12 pitch) a	and shingle color	*Paint	*Horizontal Lap siding
	No Lean To's are perr	mitted	
 Shed should be screened from s Any shed that is visible from the window Placement must be so that roof Any shed over 200 sq ft requires 	street will require a decora	annel water t	
Please Include:			
Construction may not be	egin until written approval	has been re	ceived from the ARC
Comments:			
Date received by HOA:		ed by ARC: _	
☐ Approved as Submitted	☐ Approved with Conc *See Attached	litions	☐ Not Approved *See Attached
ACC Member:			Date:
Completed Project Review:			Date: