

Date Received: _____

CAMBRIDGE GREENS 1ST ADDITION
2541 N RESTON TERRACE
HERNANDO, FL 34442
PHONE 352-746-6770
WWW.CAMBRIDGEGREENS1.COM

ACB APPROVAL
For Re-Paints, New Roofs and Driveway Changes

OWNER'S INFORMATION:

Owner's name: _____

Address: _____

Phone number: _____ Block _____ Lot _____

Roof replacement:

Type of Shingle: _____

Color of Shingle: _____

Contractor: _____

Re-paint Home:

Color of body of the house: _____

Color of the trim: _____

Color of garage door: _____

Color of Front door: _____

Color of service doors: _____

Re-paint Driveway or Installing Pavers:

Color and/or Pattern of driveway: _____

Please attach the color samples to your application. The color samples must be included before the application can be approved.

For ACB Approval Only:

Sign off Signature: _____ Date: _____