Legacy Park Community Association, Inc.

Brick Modification Request by Owner
Form MB-01

To: Legacy Park Architectural Review Committee/Property Manager

From: Owner Name: _____

Daytime Phone: _____ E-Mail: _____

Street Address: _____

I, the homeowner of record at the above address, request that the Architectural Review Committee (hereinafter referred to as the "ARC") review and approve the following alterations/property improvements in accordance with Article XI Architectural Standards in the Legacy Park Declaration of Covenants, Conditions, and Restrictions. In connection with this request, I hereby grant permission for representatives of the HOA Committee to enter my property for investigating the property modification requested on this form.

Is there any brick damage? YES _____ NO _____

What percentage of the exterior of the home is brick or how many sides are brick? _____

Purpose in requesting to paint brick: (Are you trying to accomplish a new architectural style?) YES_____NO_____

If yes, please provide inspiration photos or other examples of the desired style.

Brand of elastomeric paint or mineral paint will be used: _____

Name of Color and color code _____

Please initial to indicate you understand the following:

_____ Painted brick exterior will require maintenance that unpainted brick does not require
_____ Painting brick with masonry flat paint or stain is a permanent finish on brick
_____ Brick may need to be repainted every 5 – 7 years [depending on product]
_____You agree to paint the entire exterior of the house, not just the brick

Important Note:

Include paint chips and any other information which may assist the committee in determining the appropriateness of the proposed change**. Inability to clearly define scope of work could lead to unnecessary delays.** Please attach the Brick Modification Contractor Form (Form MB-02).

I, the homeowner of record, am aware that no painting may start prior to approval by the committee. _____ (Initial here)

Neither the Association, Board of Directors, Property Manager (PM), or any other member of the forgoing, shall be liable for any injury, damages or loss arising out of the matter of quality of any approved construction on/or modification to any lot, the structural integrity of the improvement/modification, nor for ensuring the compliance with applicable law, Building Codes or other Government requirements. By submitting this request, it hereby gives the PM and Board of Directors access to the lot to perform their review.

_____ _____

DATE SIGNATURE OF OWNER

Kindly submit request to: The form can be submitted electronically to: modifications@legacypark.org. It may be mailed to Legacy Park HOA, 4201 Legacy Park Circle, Kennesaw, Ga. 30144 or placed in the drop box outside of the office.

For more information call (770) 919-2556 or forward a note to modifications@legacypark.org. Approvals will be returned within 30 days or less and will be valid for one year.

Legacy Park Community Association, Inc.

Contractor Form for Modifying Brick

Form MB-02

To: Legacy Park Architectural Modifications Committee/Property Manager

Homeowner:

Name: _____

Street Address: _____

Per the Legacy Park Standard for painting brick, all masonry paint must be applied in accordance with manufacturer's recommendations.

Please have the painting contractor fill out this portion:

Contact Name: _____ Phone: _____

Company Name: _____

Street Address: _____

E-Mail: _____

Website: _____

Have you been trained by the manufacturer to apply this product to this surface? YES _____ NO _____

What method will be employed to modify the brick? Paint_____ Lime Wash_____ Stain_____

Is the existing brick façade damaged in any way? If so, please indicate the location and explain how it will be repaired:

_____

_____

_____

Please describe your level of experience in painting, lime washing or staining exterior brick veneer:

_____

_____

_____

Will you be following the manufacturer's recommendations for applying the product including temperature restrictions, primer paint requirements, and other requirements?

_____

_____

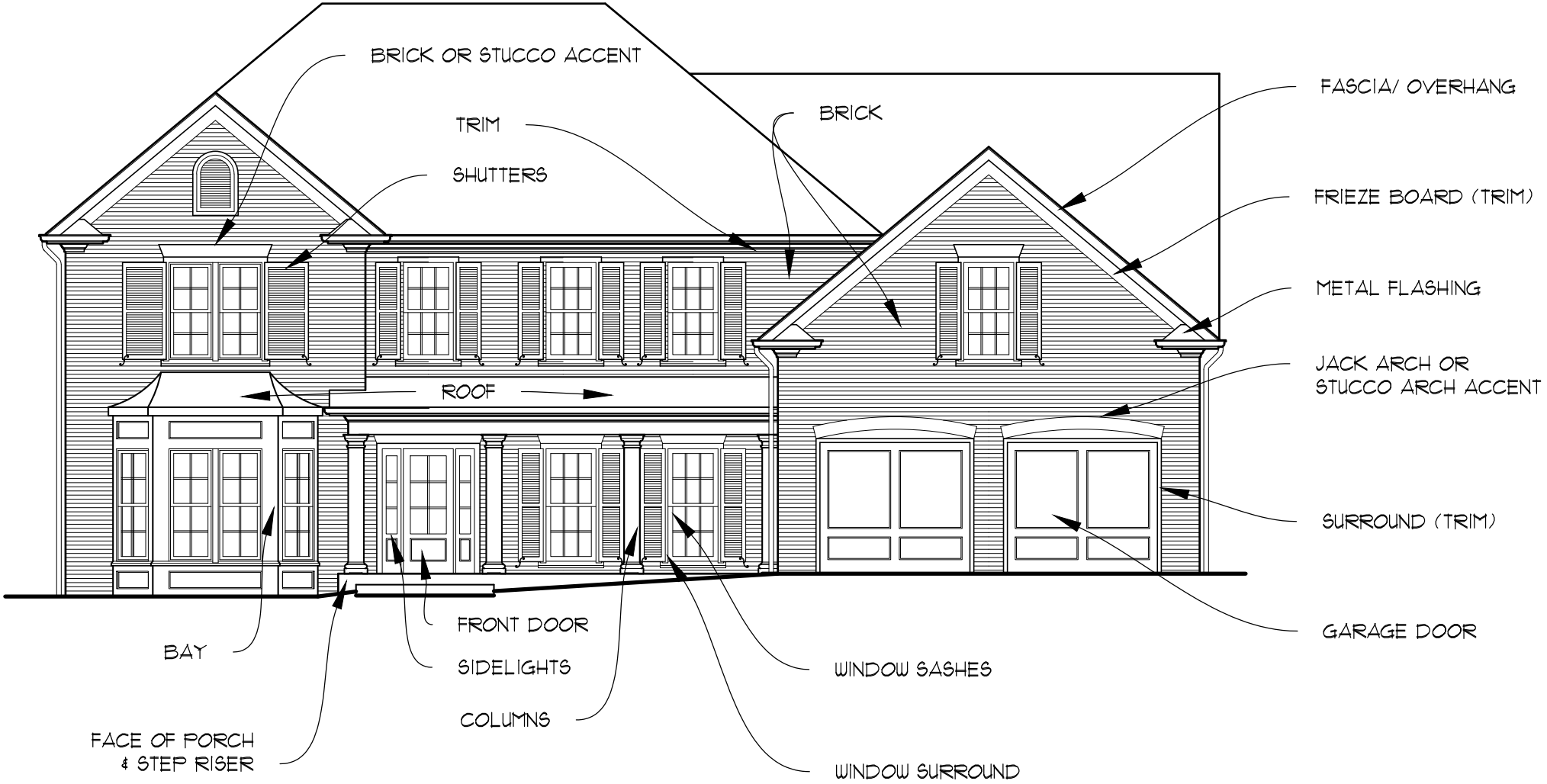
_____

Have you painted other homes in Legacy Park or in the area? _____

Have you provided the owner with their contact info? _____

Product name(s) to be used: _____

(LATEX PAINT WILL NOT BE APPROVED)



PARTS OF A HOUSE

PAINTING CHART

PLEASE INDICATE THE COLOR SELECTION FOR THE FOLLOWING:

WALL SURFACES

BRICK _____

SIDING (IF APPLIES) _____

STUCCO (IF APPLIES) _____

TRIM

FASCIA BOARDS (OVERHANGS) _____

FRIEZE BOARDS _____

WOOD TRIM AT CORNICE _____

WINDOW SURROUND (CASING) _____

DOOR SURROUND (CASING) _____

BAY WINDOW _____

WINDOWS & DOORS

FRONT DOOR _____

SIDELIGHTS _____

WINDOW SASHES _____

GARAGE DOOR _____

OTHER DOORS _____

FRONT PORCH

COLUMNS _____

PORCH CEILING _____

FACE OF PORCH _____

FLAT SURFACE OF PORCH _____

STEP RISERS _____

STEP TREADS _____

MEATL ROOFS

PORCH ROOF _____

BAY ROOF _____

OTHER

BRICK OR STUCCO ACCENTS _____

CHIMNEY METAL CAP _____

METAL FLASHING @ EAVES _____

REAR DECK _____

NOTE:
PLEASE BE SURE TO INCLUDE PAINT CHIPS WITH REQUEST

NOTE:
IF YOUR HOME DOESN'T HAVE ALL OF THE FEATURES YOU MAY INDICATE W/ NA