



Royal Oaks Homeowner's Association, Inc. c/o GRS Management, Inc.
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ARB Request Form

Date: _____

Account Number: _____

Phone: _____

Email: _____

Owner's Name: _____

Property Address: _____

Roof

Paint

Driveway

Windows/Doors

New Construction

Other

Description: _____

One (1) colored sample of material and one (1) colored photo of home as of request date is required

Date: _____

Signature: _____