



# TOWN OF GOLDEN BEACH PAINT CODE APPROVAL INSTRUCTIONS

|                          |
|--------------------------|
| APPROVAL<br>NUMBER _____ |
| DATE _____               |

**Job Address:** \_\_\_\_\_, Golden Beach, FL 33160

**Property Owner (Applicant):** \_\_\_\_\_ **TEL:** (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ **Email** \_\_\_\_\_

**Contractor Name:** \_\_\_\_\_ **TEL:** (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ **Email** \_\_\_\_\_

1. Submit the completed application with the example swatches of each color to be used.
2. Attach a recent photograph or elevation of the building labeling what colors are being used and where.
3. If a paint contractor is used, CONTRACTOR must register with the Town of Golden Beach and provide copy of license and insurance, along with a contractor application, and fee of \$50.00 or \$30.00 for renewal.
4. Color must be chosen from a Paint Color selector pallet or from an equivalent paint manufacturer. List the paint manufacturer name and color numbers below. Also attach the swatches below in the boxes. Paint swatches will be reviewed by the Zoning reviewer.
5. Any and all changes in the scope of the work to be done MUST receive prior approval.
6. Final Inspection: The applicant is required to set up a final inspection upon completion of work. A final inspection can be set up from Mon- Thurs., by emailing request to: [inspections@goldenbeach.us](mailto:inspections@goldenbeach.us) or visiting our website at <https://www.goldenbeach.us/building-and-zoning/> (24hrs prior to inspection date). It is not necessary for you to be home as long as the inspector has access to the entire perimeter of the building.

**WALL COLOR**  
must be chosen from the 1st and 2<sup>nd</sup> lightest samples from any of the color groups.  
**ATTACH SWATCH HERE**

**ACCENT COLOR**  
may be chosen from any of the 2nd and 3rd darkest samples of the same color group.  
**ATTACH SWATCH HERE**

**TRIM COLOR**  
may be chosen from any of the 3rd darkest samples of the same color group.  
**ATTACH SWATCH HERE**

MFG \_\_\_\_\_  
WALL COLOR # \_\_\_\_\_  
ACCENT COLOR # \_\_\_\_\_  
TRIM COLOR # \_\_\_\_\_

**I have read and fully understand the above instructions and requirements.**

X \_\_\_\_\_  
**Signature of Property Owner or Agent**

X \_\_\_\_\_  
**Signature of Contractor**

STATE OF \_\_\_\_\_ COUNTY \_\_\_\_\_  
Subscribed and sworn to (or affirmed) before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

STATE OF \_\_\_\_\_ COUNTY \_\_\_\_\_  
Subscribed and sworn to (or affirmed) before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Zoning Approval

\_\_\_\_\_  
Date