

PAINT REQUEST FORM

If you have been a resident, in the same unit of JMHA, for three (3) or more years, you may request paint to refresh your unit on your own.

Resident Requesting Paint: _____ Years in Unit: _____

Please circle below the room or rooms desired to paint. Standard JMHA colors will be used. Resident must provide their own tools to complete the painting (brushes, tape, rollers, etc.). Any damage to the JMHA unit caused by painting will become the responsibility of the resident on the next rent statement after inspection.

Paint requested for the following rooms:

- | Living Room
- | Kitchen
- | Utility Room/Closets
- | Hallway
- | Bedroom (1)
- | Bedroom (2)
- | Bedroom (3)
- | Bedroom (4)
- | Bathroom
- | Other: _____

I understand that I must have all painting completed within (2) weeks from the date the paint was issued.

Resident Signature: _____ Date: _____

Address: _____

Telephone: _____

Paint Received & Follow-Up

Total Gallons of Paint Received: _____ Date: _____

Issued by: _____

Inspection by: _____

Remarks:
