

Violation Complaint Form

Please print or type: Complete all the information you know. If unknown, please state so. Attach additional sheets if necessary.

INFORMATION CONCERNING WITNESS(ES) TO VIOLATION

Reporting Witness' Name	Address	Phone Number
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Other Witness' Name	Address	Phone Number
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INFORMATION CONCERNING VIOLATOR

Violator's Name	Address	Phone Number
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INFORMATION CONCERNING VIOLATION

Violation Date	Time	Location
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Section(s) of Covenants, By-Laws or Rules which were violated

Reporting Witness' Observations:

I/WE HAVE MADE THE ABOVE STATEMENTS BASED ON MY/OUR PERSONAL KNOWLEDGE AND NOT UPON WHAT HAS BEEN TOLD TO ME/US. I/WE WILL FULLY COOPERATE WITH THE ASSOCIATION AND ITS ATTORNEYS TO PROVIDE ADDITIONAL STATEMENTS OR AFFIDAVITS, AND IN THE EVENT A HEARING OR TRIAL IS NECESSARY, I/WE WILL APPEAR TO TESTIFY AS A WITNESS(ES).

Signature

Date

Signature

Date

RIVER RIDGE HOMEOWNER'S ASSOCIATION

DATE: _____

TO: _____

NOTICE OF VIOLATION

**VIOLATION OF DECLARATION, BY-LAWS AND/OR
RULES AND REGULATIONS**

You are hereby notified, as owner of _____
that you are charged with the following violation of Association's Declaration, By-laws,
and/or Rules and Regulations. The actions complained of occurred on, or about
_____ and are described as follows:

The Association is governed by its Declaration and By-laws and Rules and Regulations which must be followed. If corrective action is not taken by _____, or if this type of violation continues, it will result in a fine and charges for any resulting damages or costs being levied against you.
If you have any questions or wish to discuss this matter, please contact any Board member.

Signed:

River Ridge Board Member

Phone Number

River Ridge Board Member

Phone Number

Date