

SECTION III - COMPLAINT DESCRIPTION

Describe the complaint. If more room is needed, include additional pages with submittal.

Describe the relief being sought by Complainant or Requested Action.

I wish to complain about the individual/business named above.

Full Name: _____

Date: _____

SECTION IV - HOW TO SUBMIT THIS FORM

Please return this form to the following address:

Forest Hills Community Association
Post Office Box 2804
Arlington, VA 22202

Preferred method of communication: Writing Email

SECTION V - FINAL DISPOSITION

If, after the Board's consideration and review of the complaint, the Board issues a final decision adverse to the complaint, you have the right to file a notice of final adverse decision with the Common Interest Community Board (CICB) in accordance with the regulations promulgated by the CICB. The notice shall be filed within 30 days of the date of the final adverse decision, shall be in writing on forms provided by the Office of the Common Interest Community Ombudsman (Ombudsman), shall include copies of any supporting documents, correspondence and other materials related to the decision, and shall be accompanied by a \$25 filing fee. The Ombudsman may be contacted at:

Office of the Common Interest Community Ombudsman
Department of Professional and Occupational Regulation
9960 Mayland Drive, Suite 400
Richmond, VA 23233
804/367-2941
CICOmbudsman@dpor.virginia.gov