## **PONDEROSA TRAILS HOA**

## **COMPLAINT FORM**

First and Last Name of person who obs	erved the violation:
Lot number or address of person who o	observed the violation:
Address of the property allegedly in vic	plation of the Association's governing documents:
Date(s) the violation occurred:	
Nature of the violation:	
Written description AND ALL DATES of	evidence being submitted (i.e. photo/video/audio):
33-1803 (D)(3)). This form, along with	rizona State Statute requires you to provide your full name (A.R.S any evidence you provide, is subject to formal record requests our complaint, you understand and agree that we may share sed party.
Printed name of observer	
Signature of observer:	Date:
cc: Owner file	

REV 12.2020