

Homeowner's Association Po Box 23126 Federal Way, WA 98093 www.meadowparkhomeownersassociation.com

Appeal Request Form

Name:	Date:
Address:	Lot #:
I wish to appeal the "Notice of Non-Compliance" I received on	(Date)
Reference CC&R Number:	
Description of Non-Compliance:	
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I understand that I will have an appeal hearing with the Meadow scheduled Board Meeting. At the appeal hearing, I will be allowed will help substantiate my appeal. A binding decision will be made	ed to present evidence or information, which
I further understand that my failure to meet the time deadlines no will automatically void my appeals process.	oted in the Meadowpark Appeals Procedure
I understand that if I win the appeal, the <i>Notice of Non-Complian</i> against this particular notice will be dismissed. If I lose the appeal back to 15 calendar days after the <i>Notice of Non-Compliance</i> was	eal, the fine accrual will be retroactive
Signed:	Date: