

**Sunrise Lake Property Owners Association, Inc.**

101 Sunrise Drive

Milford, Pennsylvania 18337

Phone: (570) 686-1880 Fax: (570) 686-2320

[www.sunriselake.org](http://www.sunriselake.org)

If you would like to appeal your citation, it must be in writing with a brief explanation. The Sunrise office must receive the letter requesting grievance within (14) fourteen days from receipt of citation. If the letter of appeal is not received within (14) days allotted, then the citation is considered final.

**Below please provide a brief explanation for appeal**

**Please print clearly and include phone number**

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Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

**Would you like to appear in person at the hearing?** Yes: \_\_\_\_\_ No: \_\_\_\_\_

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**If you prefer not to appear in person and would like the Grievance Committee to base their decision on your appeal letter, please sign the waiver below.**

I \_\_\_\_\_, hereby waive my right to appear before the Grievance Committee and grant the Grievance Committee the right to make a decision based on my appeal letter.

Name: \_\_\_\_\_

Date: \_\_\_\_\_

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**Grievance Committee Results**

Citation # \_\_\_\_\_ Upheld \_\_\_\_\_ Dismissed \_\_\_\_\_

Citation # \_\_\_\_\_ Upheld \_\_\_\_\_ Dismissed \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_