



REFERENCE NO.:

TO COMPLETED BY THE COMPLAINANT:

CONTACT NO.:

Date occurrence of concern:

NAME:

ADDRESS:

ACT/S COMPLAIN:

TO COMPLETED BY OFFICER IN CHARGE:

1. CONCERN/S RECEIVED BY:

Name/Signature:

2. ACTION TAKEN:

☐ Endorse to concern party (POC/BOARD) ☐ Other action:

3. ACTION TAKEN BY THE BOARD/POC:

Officer's Signature over Printed Name

CONTACT US:

*BILLING CONCERN – Email: camellalipahoa@yahoo.com.ph; camellahoa2021@gmail.com; **ENGINEER CONCERN – Email: camhoa.engineer421@gmail.com
 FB Messenger: **Camella Lipa Hoai** | FB Page: **Camella Lipa Homeowner's Association, Inc.-Official**



Camella Lipa Homeowners' Association, Inc.

Brgy. Tibig, Lipa City Batangas

HLURB Reg. No. 15447 • TIN No. 420-931-299-000

Official Website: <https://camellalipahoa.com>

Contact No.: +639171364374; Email: hoaofficial@camellalipahoa.com

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