

# COMPLAINT/VIOLATION FORM

REPORTED BY		
Name	Address	
Phone	Date Received	Time Received
Nature of Complaint		
<input type="checkbox"/> General Complaint <input type="checkbox"/> Against Individual		
IF AGAINST INDIVIDUAL		
Name	Address	
Complaint/Violation:		
<input type="checkbox"/> Submitted To Violations Director <input type="checkbox"/> Submitted To Maintenance Director		
<input type="checkbox"/> Submitted To Architectural Director <input type="checkbox"/> Submitted To Security		
<input type="checkbox"/> Handled By Office <input type="checkbox"/> Other (explain)		
COMPLAINT RESOLUTION		
Action Taken		
Resolved Satisfactory?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Date Resolved
If NO, Explain		
Were Fines Assessed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If YES, Amount \$ _____
Note payment history of any assessed fines (special assessments)		
Additional Information (if any)		
File one copy in the property folder of the member in violation, complaint and one copy in the property folder of the member of violation received against (if applicable).		