



COMPLAINT FORM

Nature of Complaint

Date complaint being made

Illegal Activity

Pet

Parking

Noise/Nuisance

Damage

Maintenance

Member making complaint

100

Address of Member making complaint

Maintenance

Other

Telephone number(s)

Person(s) the complaint is being made on

Address the complaint is being made on

Detail of the complaint:

TWO SIGNATURES REQUIRED

Signature of Member: _____

Signature of Member:

<u>Office use only</u>	
Date received: _____	Action(s) taken <input type="checkbox"/> letter/date: _____ <input type="checkbox"/> verbal/date: _____ <input type="checkbox"/> referred to Board <input type="checkbox"/> meeting date: _____ <input type="checkbox"/> no action taken

1/07



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