COVENANT VIOLATION COMPLAINT FORM

Ways to submit this form:

Email: Admin@InfoHOA.com

Fax: 866-724-5497

Mail: Document Processing, PO Box 26389, Greenville, SC 29616

Portal: Go to www.InfoHOA.com

CONTACT INFORMATION OF MEMBER FILING COMPLAINT:

*Complaint may be filed by association members only *Failure to provide contact information will render complaint invalid

Date complaint filed:		
Name:	Address:	
Phone number:	Signature:	
	COMPLAINT	
As a property owner within the	(association), I do sw	ear and
confirm that on or about	(date of violation), I did witness the fo	llowing
	der to be a violation of the restrictive covenants.	J
*Person filing complaint responsible to review restrict	tive covenants to determine if event / occurrence is prohibited	
Address where violation occurred:		
Photos or other documentation included	d with this complaint: YES NO	

PLEASE NOTE: Complaint remains anonymous except in the following conditions:

*Person against which complaint filed requires hearing with the Board to object / deny complaint.

*Person against which complaint filed pursues legal action against the association.

Please keep a copy of this complaint for your records, as copies of the complaint will not be provided by our office. You will not be contacted in response to this complaint, unless further communication is required for enforcement.