

Today's Date: _____

Buckwood Homes Association

COMPLAINT FORM

Name and address of the house in violation: _____

What is the violation: _____

Length of duration the violation has been occurring: _____

Have you had any contact with the owner regarding the violation: Yes or No
If yes, please explain: _____

Has anyone else been notified of the complaint (i.e. Police, City, etc.): Yes or No
If yes, please explain: _____

Your name: _____

Your address: _____

Your phone number: _____

Your email address: _____

Would you like to remain anonymous to the homeowner in violation: Yes or No

Please return the form to:

Buckwood Homes Association
Attn: Patricia Stanley
4234 Benchmark Trace