

**LAKELAND VILLAGE
HOMEOWNER VIOLATION/ COMPLAINT FORM**

Complainant Name: _____

Address: _____

Email: _____ Phone: _____

Signature Date

** No action will be taken in regards to the complaint without the above section filled out with a signature and date.

VIOLATION / COMPLAINT DETAILS

Date of incident (if relevant): _____ Time (if relevant): _____

Respondent Name: _____

Violation/Complaint Address: _____

Who/What is the subject of your Complaint: _____

Summary of Complaint: _____

Which Covenant, Resolution, Rule or Regulation does this complaint violate? (Documents found at www.lvcc.com) _____

As a result of making this complaint, desired outcome: _____

Would you like to be contacted with outcome? ___ yes ___ no

If complaint goes to hearing, are you willing to attend hearing & be a witness? ___ yes ___ no

CORRECTIVE ACTION

Complaint forwarded to: _____ Date forwarded: _____

Describe action taken: _____

Respondent advised: ___ yes ___ No Tenant advised: ___ yes ___ no ___ N/A

Date Complaint Closed: _____

For LakeLand Village office use only

Complaint received by _____ Date received _____