

INITIAL COMPLAINT FORM

This form is found on our website.

Complainant _____

Address _____ Phone _____

Violator's Name: _____

Address _____ Phone _____

Specific section of the Covenants/By-Laws/Rules and Regulations being violated:

Objectionable activity including date(s) and location(s): (use another sheet of paper if needed).

Steps complainant has taken to resolve the problem:

Signature of Complainant _____ Date _____

Documentation of Complaint Follow-Up

Date _____

Action taken by RHOA Community Relations Director _____

Date _____

Recommendation to BOD _____

Signature of Community Relations Director _____ Date _____

Date _____

BOD Action _____ Date _____

Complainant and Violator informed of BOD Decision and the right to provide any further information.

Signature of Board President _____ Date _____