Fairfield @ the University Homeowners Assoc. Compliance Complaint Form

(Complainant's Name)	Date
(Complainant's Email Address)	Phone Number
(Complainant's Address) (Above information will remain confidential and used solely	for follow-up notification purposes)
(Address of Problem Area and Name, if known)	-
Describe the Complaint(s):	

SUPPORTING DOCUM	ENTATION (i.e., PICTURES, E	TC. ATTACHED):	
	YES		
	─ NO		
You may also print and	mail this form to: Hawthorne I	Management Company, attn: Barrie C	ameron, PO Box 11906, Charlotte, NC 28220
Office Use Only:			
	Date Complaint Received	Date of Initial Investigation	Investigator's Name
 Action Taken/Date			
Date Complainant Notifi	ed of Action		
Resolved: YES	Follow ı	ıp investigation needed by (date):	