

Complaint Form

I am notifying the Board about a violation in the rules and regulations, which I have described below. I understand that in response to my claim, you will pursue enforcement of this rule. If the Association needs testimony at any point in the enforcement process, I agree to testify to the facts of my claim, as I have stated them below. I understand this information will remain confidential unless necessary to resolve the issue.

Declaration/Bylaw Rule or Formal Board Rule and Regulation violated (**Photos** of violation welcome)

Dates of violation: _____

If known, who violated the rule or regulation? _____

ADDRESS of VIOLATOR: _____

Can the violation be verified? YES ____ NO ____

If the violation involved an act, did anyone else witness the act? YES ____ NO ____

Who else witnessed the violation? _____

Signature of complainant: _____

(printed name) _____

Address: _____

Home Number: (____) ____ - ____ **Cell Phone:** (____) ____ - ____

Email: _____ **Work Number:** (____) ____ - ____

Date: _____

I have received and read a copy of the Rules and Regulations and agree to abide by the same.

Submit This Form To:
SBS Management, LLC
P. O. Box 95 Hilliard, OH 43026
Phone (614) 527-7909 Fax (614) 527-0877
info@sbs-management.com

(Please copy as needed. Extra forms for print are available at sbspropertymanagement.com)