



BIRKDALE COMMUNITY ASSOCIATION, INC.

Rules Violation Complaint

Address of alleged violation: _____

Describe in detail the alleged violation:

When did the violation occur? __/__/__

Is violation on-going? Yes No

Person making complaint (Optional):

Name _____

Address _____

Email _____

Attach photos if appropriate

FOR ASSOCIATION USE ONLY



Owner Name: _____

Owner Street Address _____

Owner City, State, Zip: _____

Tenant Name: _____

Comments: _____

Date first letter sent: __/__/__

Request for hearing by Owner: Yes No

Hearing date set for: __/__/__

Date second letter sent: __/__/__

Date request received: __/__/__

Date hearing letter sent: __/__/__