

Raintree Plantation Property Owners Assoc., Inc.

COMPLAINT/VIOLATION FORM

NUMBER _____

REPORTING PERSON INFORMATION (OPTIONAL)

NAME _____ PHONE _____

ADDRESS _____ SECTION/LOT _____

VIOLATION INFORMATION DATE OF VIOLATION _____

ACCUSED'S NAME (if known) _____

ADDRESS (if known) _____ PHONE _____

CITY/STATE _____ SECTION/LOT _____

VEHICLE TYPE (if appropriate) _____ LICENSE _____

VIOLATION LOCATION _____

VIOLATION (brief description) _____

ACTION TAKEN _____

DATE CONTACTED _____ LETTER SENT _____ FINED _____

DATE COMPLETED _____ SUPPORTING DOCUMENTATION PROVIDED _____

Received at POA Office by _____ DATE/TIME _____