

Homeowner Association Concern Form

Association Name: _____

Date Submitted: _____

Nature of Concern:

- | | | |
|--|--|-----------------------------------|
| <input type="checkbox"/> Landscaping | <input type="checkbox"/> Roofing | <input type="checkbox"/> Painting |
| <input type="checkbox"/> Irrigation | <input type="checkbox"/> Lighting | <input type="checkbox"/> Noise* |
| <input type="checkbox"/> Pool | <input type="checkbox"/> Parking | <input type="checkbox"/> Other |
| <input type="checkbox"/> Pets* | <input type="checkbox"/> Dumpsters | |
| <input type="checkbox"/> Street/Walk/Drive | <input type="checkbox"/> Exterior Building Maintenance | |

Explain Below: Please be specific as possible, including (when necessary) Building numbers, Street names, Etc to help assist in locating the problem.

*These concerns require a specific address of violator to be provided in order for any action to be taken.

Sign and return this form to Russell Property Management, 106 Regency Blvd, Greenville, NC 27834, Fax it to 252-355-9641 or drop it off at our office. Your concerns will be passed along to the appropriate committees. Please retain a copy of this form for your records. Additional forms are available upon request.

Name: (Please Print) _____

Signature: _____

Phone #: _____ Email: _____

Comment Form Received by RPM: (Date) _____

Received By: _____ Handled By: _____

Action Taken: _____

Refer to board at monthly meeting (Date) _____

Referred to committee chairperson: _____ Date: _____

Comments:
