

# **ASSOCIATION COVENANT VIOLATION COMPLAINT FORM**

**Return by mail to:**

**Southfork Property Owners Association  
11605 Meridian Market View  
Unit 124, PMB147  
Falcon, CO 80831**

## **CONTACT INFORMATION FOR ASSOCIATION MEMBER FILING COMPLAINT**

*\*Complaint maybe filed by association members only*

*\*Failure to provide contact information or signature will render complaint invalid*

Date complaint filed: \_\_\_\_\_ Association name: Southfork POA

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone number: \_\_\_\_\_ Signature: \_\_\_\_\_

## **COMPLAINT**

As a property owner within the association listed above, I do swear and confirm that on or about \_\_\_\_\_ (date of violation), I did witness the following event(s) or occurrence(s) which I consider to be a violation of the restrictive covenants:

*\*Person filing complaint responsible to review restrictive covenants to determine if event/occurrence is prohibited.*

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Address where violation occurred:

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Photos or other documentation included with this complaint: YES \_\_\_\_\_ NO \_\_\_\_\_

*\*Complaints including photos or other documentation must be mailed*

**PLEASE NOTE: Complaint remains anonymous except in the following conditions:**

**\*Person against which complaint filed requires a hearing with the Board to object/deny complaint.**

**\*Person against which complaint filed pursues legal action against the association.**

**Please keep a copy of this complaint for your records, as copies of the complaint will not be provided by the association. You will not be contacted in response to this complaint, unless further communication is required for enforcement.**