

HOMEOWNER APPEAL FORM

Instructions: Please attach any supplemental information to this form and submit via email, fax or mail to the address listed above.

Community Name:		Current Owner <input type="checkbox"/>
		Previous Owner <input type="checkbox"/>
Homeowner Name (s):		Written Appeal <input type="checkbox"/>
		Hearing Request <input type="checkbox"/>
Property Address:		Lot/Unit #:

Description of Homeowner's Request:

Homeowner Signature: _____ Date: _____

FOR ASSOCIATION USE ONLY BELOW

Assessments:		Collection Cost:		Late Fees:	
Attorney Fees:		Enforcement Fees:		Misc. Fees:	

Legal/Collections

Recommendation 1:

Recommendation 2:

Recommendation 3:

Board Decision:

Board Signature: _____ Date: _____