VISION COMMUNITY MANAGEMENT
16625 S DESERT FOOTHILLS PKWY, PHOENIX AZ 85048
OFFICE: (480) 759-4945 FAX: (480) 759-8683 EMAIL: Appeals@WeAreVision.com

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** ☐ **Previous Owner** ☐
Homeowner Name (s):			**Written Appeal** ☐ **Hearing Request** ☐
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: _____