



Association Complaint Form

SBS Management LLC | 4872 Cemetery Road, Hilliard, OH 43026 | 614-527-7909 | Fax: 614-527-0877

I am notifying the Board about a violation in the rules and regulations, which I have described below. I understand that in response to my claim, you will pursue enforcement as long as it is in violation of the Association rules/regulations. If the Association needs testimony at any point in the enforcement process, I agree to testify to the facts of my claim, as I have stated them below. I understand this information will remain confidential unless necessary to resolve the issue.

Complete and submit to SBS Property Management

Association property address: _____

Association name: _____

Declaration/bylaw rule or formal board rule and regulation violated : _____

Date of violation: _____ If known, who is the violator?: _____

Address of violator: _____

Can the violation be verified? Yes No

If the violation involved an act, did anyone else witness the act? Yes No

Who else witnessed the violation?: _____

Your Full Name: _____

Your address: _____

Home phone: _____ Cell phone: _____

Work phone: _____

Email address: _____

I have received and read a copy of the Rules and Regulations and agree to abide by the same.

Today's date: _____ Signature: _____