

COMPLAINT OR REQUEST FORM

TO: Shadow Lake Board of Directors

FROM: _____ SIGNATURE: _____

ADDRESS: _____

PHONE: _____ DATE: _____

EMAIL: _____

Specific request or complaint (Supply name and address of any other party involved)

NAME: _____

ADDRESS: _____

REQUEST OR COMPLAINT: _____

ATTACH AN ADDITIONAL SHEET IF NECESSARY.

Steps you have taken previously toward a solution: _____

Your suggested solution to the problem: _____

If the Board would seek legal remedies in this matter, would you be willing to testify in Court? (Please initial if the answer is yes.) _____

The following information is to be supplied by the management company:

1. Date Received: _____ 2. By: _____

3. Action Taken: _____