



## Complaint Form

Your Name: \_\_\_\_\_

Your Address: \_\_\_\_\_

Your Phone Number: \_\_\_\_\_

Your E-mail address: \_\_\_\_\_

Information regarding incident(s): (Please include as much information as possible, including any photographs that may help explain)

Name of person committing the alleged violation: \_\_\_\_\_

Address of person committing the alleged violation: \_\_\_\_\_

Date(s) of alleged incident(s): \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

Please describe the incident(s) in as much detail as possible (use additional sheet(s) if necessary):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What statutes, covenants, or other rules were violated (please identify specific sections):

\_\_\_\_\_  
\_\_\_\_\_

Did anyone else witness these incidents:            YES                            NO

If the answer is "Yes," please state the witnesses' names, addresses, and telephone numbers:

\_\_\_\_\_  
\_\_\_\_\_

Please sign below:

Date:

\_\_\_\_\_

**Completed form should be returned to:**

\_\_\_\_\_  
(Your HOA)  
c/o The Colorado Property Management Specialists, Inc.  
19751 E. Mainstreet Suite 275  
Parker, CO 80138                            Email: [info@the-cpms.com](mailto:info@the-cpms.com)