

COMPLAINT FORM
San Ignacio Villas Inc., HOA

COMPLETE THIS FORM AND RETURN TO:

e-Mail: HOASanIgnacioVillas@gmail.com (preferred)

OR: Place in Drop Box at the Pool

PERSON WHO OBSERVED THE VIOLATION:

NAME: _____ LOT # _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

PROPERTY IN VIOLATION OF SIV GOVERNING DOCUMENTS:

ADDRESS: _____ LOT # _____

DATE/S VIOLATION OCCURRED: _____

NATURE OF THE VIOLATION/S: _____

Per Arizona Law, any complaint lodged with the Association will **NOT** remain anonymous. The person complaining of the alleged violation must state their first and last name and this information may be provided to the party who is accused of the violation.

SIGNATUER OF OBSERVER: _____

DATE: _____