

## PROPERTY VIOLATION REPORT

Date: \_\_\_\_\_

Community Name: \_\_\_\_\_

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

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

Email Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Please complete this form and submit it to the Homeowner Association at:

498 Palm Springs Drive, Suite 235  
Altamonte Springs, FL 32701  
Fax: 407-260-5344

Location of Violation: \_\_\_\_\_

Issue:

Please explain the violation. If relevant, include the date and time.