

**COMPLAINT FORM – REQUEST FOR INVESTIGATION OF VIOLATION  
COMPLIANCE DEPARTMENT  
PO BOX 2220, LAGUNA HILLS, CA 92654**

**IMPORTANT: If your complaint concerns pet violations or noise issues, your first step is to contact Security at 580-1400 so that a security report can be issued. For nuisance violations it is recommended that more than one resident sign this form.**

**ALL COMPLAINT FORMS REMAIN ANONYMOUS AND COMPLAINANT  
INFORMATION IS NOT DISCLOSED TO THE ALLEGED VIOLATOR.**

<b>NAME OF COMPLAINANT 1:</b>	<b>MANOR #</b>	<b>TEL. #</b>	<b>DATE</b>
<b>NAME OF COMPLAINANT 2:</b>	<b>MANOR #</b>	<b>TEL. #</b>	<b>DATE</b>
<b>NAME OF ALLEGED VIOLATOR (S):</b>			<b>MANOR #</b>

**NATURE OF VIOLATION**

<input type="checkbox"/> <b>PET ISSUES</b> Date reported to Security _____	<input type="checkbox"/> <b>CLUTTER</b> <input type="checkbox"/> <b>UNAPPROVED ALTERATION</b> <input type="checkbox"/> <b>60-DAY GUEST LIMIT EXCEEDED</b> <input type="checkbox"/> <b>UNAUTHORIZED CARE PROVIDER</b>	<input type="checkbox"/> <b>ILLEGAL OCCUPANT(S)</b> <input type="checkbox"/> <b>ILLEGAL LESSEE(S)</b> <input type="checkbox"/> <b>UNREGISTERED CO-OCCUPANT</b>
<input type="checkbox"/> <b>OTHER:</b>		

**PLEASE PRINT**

**STATE NATURE OF COMPLAINT - DATES, TIMES, OBSERVATIONS, ETC.  
(If more room is required to explain complaint, use other side of this form)**


**FOR OFFICE USE ONLY**

**ACTION TAKEN BY** \_\_\_\_\_

<input type="checkbox"/> Telephone call made to complainant(s)	Date:
<input type="checkbox"/> Telephone call made to alleged violator(s)	Date:
<input type="checkbox"/> Letter mailed to alleged violator(s)	Date:
<input type="checkbox"/> Referred to Security Inspectors for Investigation	Date:
<input type="checkbox"/> Referred to Security Supervisors for Investigation	Date:
<input type="checkbox"/> Other:	Date:

**DISPOSITION**

<input type="checkbox"/> Violation Resolved	<input type="checkbox"/> Referred to Board of Directors for Hearing
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