

COMPLAINT FORM

HIGHLAND PLACE COMMUNITY ASSOCIATION, INC.

Please sign and date each page.

Name of complainant: \_\_\_\_\_

Address of complainant: \_\_\_\_\_

Phone (h) \_\_\_\_\_

Phone (c) \_\_\_\_\_

Email: \_\_\_\_\_

Preferred method of contact: \_\_\_\_\_

Please describe your complaint:

Date and time of Alleged Violation: \_\_\_\_\_

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

Name(s) and address(es) of complaint subjects: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please deliver to:

Highland Place Community Association, Inc.

P. O. Box 1603

Kilmarnock, VA 22482

Email: [rogergruben@gmail.com](mailto:rogergruben@gmail.com)

The Association may elect not to take action on any complaint which does not conform to the above-referenced delivery requirements or include the requested information on this form.

Upon receipt of your complete, written complaint, the Association will begin an investigation. The Association will maintain a record of your complaint for at least one year from the date upon which it takes action to resolve your complaint.

You may contact the Association in writing via mail or by email using the above referenced contact information.

The office of the Common Interest Community Ombudsman ("Office"), is a government body, which may assist you in using the complaint procedures set forth in the Association's governing documents, as well as the Virginia Property Owners' Association Act. In accordance with the Common Interest Community Board's (CIC BOARD) rules and procedures and VA Code §54.1-2354.4, you may give notice to the CIC Board of any final adverse decision which your Association may make regarding your complaint. You must file the notice within 30 days of the final adverse decision. Your notice must be in writing on forms prescribed by the Commonwealth Board. Shall include copies of all records pertinent to the decision, and shall be accompanied by a filing fee. The Commonwealth Board may, for good cause shown, waive or refund the filing fee upon a finding that payment of the filing fee will cause you undue financial hardship. For more information, please contact the Office of the Common Interest Community Ombudsman

Department of Profession and Occupational Regulation

9960 Maryland Drive Suite 400

Richmond, Virginia 23233-1464

Office – 804-367-2941

Email – [cic@dpor.virginia.gov](mailto:cic@dpor.virginia.gov)

Signature: \_\_\_\_\_

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

TO BE COMPLETED BY ASSOCIATION REPRESENTATIVE ONLY

Received by: \_\_\_\_\_

Title: \_\_\_\_\_

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