



Homestead in the Willows Homeowners Association

# Possible Covenants & Restrictions Violation

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

**Location of Possible Violation**

Responsible Party (if known) \_\_\_\_\_

Address or Location \_\_\_\_\_

**Describe the Possible Violation**

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

**Reported by:**

Name \_\_\_\_\_ Phone \_\_\_\_\_

***The Board cannot take action on unsigned complaints.***

**Received by:**

Name \_\_\_\_\_ Date \_\_\_\_\_

Resolution: \_\_\_\_\_

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