

MEADOW BRANCH SOUTH HOMEOWNERS ASSOCIATION (MSBHOA)

COMPLAINT FORM

Mail to: P.O. Box 2304, Winchester, VA 22604

Email to: president@meadowbranchsouth.com

Pursuant to House Bill (HR) 516, effective July 1, 2008, all reports or complaints to the Association must be in writing by Association members. The Association’s complaint process is located herein and at: www.meadowbranchsouth.com. Members have the right to a hearing before the Board of Director (BOD) and/or to present information on their behalf. Association members also have the right to appeal BOD final decisions to the Virginia Office of the Common Interest Community Ombudsman.

The Virginia Ombudsman receives complaints – Notices of Adverse Decision – from Association members who allege the Association governing body violated legal requirements (statutes, regulations, or Association governing documents). Notices must be filed within 30 days of the BOD’s final adverse decision, must be submitted in writing on the Association’s form, must include supporting documentation, and must include a \$25 filing fee (CIC Board may waive for demonstrated hardship).

The following process is for addressing requests from Members for enforcement of any right, restriction, provision, covenant, or condition which may be granted by the Declarations, rules, or other applicable documents is proposed for the Board of Directors to adopt. No action may be taken without the following information. For harmony and safety reasons, the Association will maintain the confidentiality and will not disclose the information below. *(Exception is court ordered or written consent by Association members.)*

DATE OF COMPLAINT / REQUEST: _____

HOA MEMBER “COMPLAINANT / REQUESTOR”: _____

ADDRESS (include LOT #): _____

PHONE NUMBER: _____

E-MAIL ADDRESS: _____

STATEMENT OF COMPLAINT / REQUEST: _____

(Specific portion of Declaration, Covenants, Rules, or other applicable documents upon which the complaint or enforcement request is based: Address of the Lot in respect to the request (if applicable).

ANY ADDITIONAL INFORMATION: _____

(_____ Number of attachments including complaint MBSHOA Complaint Form)