

# **BAY SQUARE CONDOMINIUM**

## **COMPLAINT FORM**

Your Name: \_\_\_\_\_ Unit #: \_\_\_\_\_

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

Complaint concerns:   Resident   Guest   Building   Grounds   Noise   Pet   Other

If this regards a resident, please provide:

Name: \_\_\_\_\_ Unit #: \_\_\_\_\_

Details (please include relevant dates and times):

What if any action have you taken, and when:

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***[Below For Bay Square Board/Management Use Only]***

Complaint made by:   Owner   Renter

Complaint concerns:   Resident   Guest   Building   Grounds   Noise   Pet   Other

If a guest, is the unit they were visiting known?   Yes   No   Unit #: \_\_\_\_\_

Date referred to the Board: \_\_\_\_\_

Date first letter sent to unit owner/renter: \_\_\_\_\_

Rules violation:   Yes   No

Fine Imposed:   Yes   No   If Yes, amount of fine: \$ \_\_\_\_\_

Hearing Requested:   Yes   No   If Yes, date of hearing: \_\_\_\_\_

Management Company/Board Comments: