HOMEOWNER VIOLATION REPORT

The Shores
At Boca Raton
Homeowner's Association, Inc.

Date _____

REPORTING RESIDENT

Name _____

Address _____

Telephone _____ Email _____

VIOLATION DESCRIPTION

Please be as specific as possible by identifying, if possible, the name and address of the person(s) involved, the date(s) and time(s) of the incidents(s) and all other relevant information.

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You may return this form either to the management office located at the clubhouse or via email to emondello@grsmgt.com. Please also feel free to email me your concerns directly without this form.

SIGNATURE

Reporting Party Signature _____ Date _____