

BOX HILL COMMUNITY SERVICES ASSOCIATION, INC.
2920 STRATHAVEN LANE
ABINGDON, MD 21009

HOA Complaint Submission Form

Complaint Information from Box Hill Resident: Your identity will not be disclosed to the homeowner/resident underneath their information.

- First and Last Name: _____
- Property Address: _____
- Phone Number: _____
- Email Address: _____

Complaint Details

- Date of Incident: _____
- Time of Incident (if applicable): _____
- Location of Issue (if different from your address): _____

Type of Complaint (check one)

- Property Maintenance Noise Disturbance Parking Violation Landscaping Issue
 Architectural Violation Common Area Concern Safety Issue
 Other: _____

Description of Complaint

(Please provide as much detail as possible, including what occurred, who was involved, and any prior attempts to resolve the issue.)

Relevant HOA Bylaw or Rule (if known)

Supporting Evidence (optional)

- Photos Videos Documents
 Other: _____

Have you discussed this issue with the involved party? Yes No

If yes, please describe the outcome: _____

Preferred Resolution / Requested Action

Acknowledgment

I certify that the information provided is accurate to the best of my knowledge. I understand that submission of this complaint does not guarantee enforcement action and that the HOA Board will review all submissions in accordance with governing documents.

Signature: _____ Date: _____