

Return to: Presidential Lakes P.O.A., P.O. Box 186, King George, VA 22485

Occurrence: Date _____ Time _____ Location _____

Details of Complaint _____

Person(s) involved _____

What did you do to try to resolve the situation? (include date and time)

Your name _____ Date _____

(Please print)

Address _____

Signature _____ Section _____ Lot _____

FOR OFFICE USE ONLY

Preliminary review:

Date rec'd _____ Not under PLPOA control
Contact: _____
 Under PLPOA control
Assigned to: _____

Date responded _____

+++++

Association action: _____

Date responded _____

Signature of Association Authority

COMPLAINT FORM

Return to: Presidential Lakes P.O.A., P.O. Box 186, King George, VA 22485

Occurrence: Date _____ Time _____ Location _____

Details of Complaint _____

Person(s) involved _____

What did you do to try to resolve the situation? (include date and time)

Your name _____ Date _____

(Please print)

Address _____

Signature _____ Section _____ Lot _____

FOR OFFICE USE ONLY

Preliminary review:

Date rec'd _____ Not under PLPOA control
Contact: _____
 Under PLPOA control
Assigned to: _____

Date responded _____

+++++

Association action: _____

Date responded _____

Signature of Association Authority