VILLA TAVIANA VIOLATION REPORT

There must be at least one signature from an Owner/Member of the Association to pursue a violation against another Owner or tenant. Please provide a brief description of the violation and be as specific as possible with enough detail so that the Board can take the appropriate actions required under the circumstances.

Name:	Name:	
Condominium #:	Condomir	nium #:
Phone: Date:	Phone:	Date:
Signature:	Signature	:
ALLEGED VIOLATOR INFORMATIO	<u>N</u> :	
Name (if known):	Condominium#:	Phone #:
Description of alleged violation:		
(If additional space	is needed, please use rever	se side of this form)

Date(s) and approximate time(s) the alleged violation has occurred or occurs:

How often has the alleged violation occurred? (As of the date this Violation Report is being filled out):