

SUGGESTION / COMPLAINT RECORD

TO:

**CONASHAUGH LAKES
COMMUNITY ASSOCIATION**
4020 Conashaugh Lakes
Milford, PA 18337

DATE _____

SUGGESTION / COMPLAINT

NOTE: IT IS THE POLICY OF THE PROPERTY OWNERS ASSOCIATION TO RECORD ALL SUGGESTIONS AND COMPLAINTS. NAMES OF INDIVIDUALS AND THEIR SIGNATURES (IF SUGGESTIONS / COMPLAINTS ARE MADE IN PERSON) SHOULD APPEAR ON THIS FORM.

PLEASE BE ADVISED OF THE FOLLOWING CONDITION / SITUATION THAT SHOULD BE CORRECTED AS SOON AS POSSIBLE.

NATURE OF SUGGESTION / COMPLAINT:

_____ RECREATION _____ MAINTENANCE _____ TRASH _____ SECURITY
_____ OTHER PLEASE SPECIFY _____

SITUATION NOTED: (NAMES, PLACES, TIMES)

SUGGESTION / RECOMMENDATION:

SIGNATURE _____ NAME _____ PLEASE PRINT

ADDRESS _____

LOT _____ PHONE _____

ACTION TAKEN:

SIGNATURE _____