


HOA Compliance/Violation Reporting Form

HOA homeowners may use this form to report compliance and violation issues that they observe within their Association. To be considered for review, please complete this form in full.

Thank you for helping to preserve, protect, and enhance your community!

SUBMITTER INFORMATION:

 Association (HOA) Name: _____

 Full Unit Address of Submitter Within HOA: _____

 Submitter Name: _____

 Submitter Phone #: _____  Submitter E-Mail: _____

VIOLATION INFORMATION:

 Date(s)/Time(s) of Violation: _____



 Full Address/Location of Violation Within HOA: _____

 Violator's Name (if known): _____

 Detailed Description of Violation:


 HOA Rule Violated (*cite HOA rule/regulation*) – *OPTIONAL*:


EVIDENCE:



  If you have photo or video evidence, please include them with this form submission, or provide a link:

CONTINUANCE DECISION:

The Management Company and the Board of Directors will independently review and address this reported violation in accordance with the Association's Violation Policy.

 If the alleged violation is *independently verified*, this form and your identity will remain **anonymous** to the accused party and the management company, along with the Board of Directors, will proceed with applicable enforcement.

 If the Management Company and the Board of Directors *cannot* verify this alleged violation (***select one***):

	<p>I understand that if the alleged violation cannot be independently verified, I would like to remain anonymous and not proceed with this alleged violation.</p> <p>This violation case will close, with no further action taken.</p> <p>This is the default action if no decision has been selected on this form.</p>
	<p>I understand that if the alleged violation cannot be independently verified, I would like to continue taking action on this alleged violation.</p> <p>I understand that my attendance at an HOA hearing may be required and that the accused party has the right to confront their accusers at the hearing. Therefore, my identity will be disclosed to the accused party during this process.</p>


ACKNOWLEDGEMENT & SIGNATURE

I am the reporting party and the information provided with this form is accurate.

- Submitter Printed Name: _____
- Submitter Signature: _____
- Date: _____

Send this completed form and evidence to either:

 compliance@virtualhoa.com (preferred method for faster processing)

 VirtualHOA.com, 2020 Alameda Padre Serra, Suite 220, Santa Barbara, CA 93103