Evergreen Heights Community Association P.O. Box 1238, Annandale, VA 22003

Phone: (703) 941-4886

ASSOCIATION COMPLAINT FORM

Pursuant to Chapter 29 of Title 55 of the Code of Virginia, the Board of Directors (Board) of the Evergreen Heights Community Association (EHCA or Association) has established this complaint form for use by persons who wish to file written complaints with the Association regarding the action, inaction or decision by the governing board, managing agent or association inconsistent with applicable laws and regulations.

Legibly describe the complaint in the area provided below, as well as the requested action or resolution of the issues described in the complaint. Please include references to the specific facts and circumstances at issue and the provisions of Virginia laws and regulations that support the complaint. If there is insufficient space, please attach a separate sheet of paper to this complaint form. Also, attach any supporting documents, correspondence and other materials related to the complaint.

Sign, date and print your name as listed above.	nd address below and subm	it this completed form	ı to tl	ne Asso	ociation at the address	
Printed Name	Sig	nature	Date			
Mailling Address	_					
	I 4/I I 14	A 11				
Lot/Unit Address						
E-mail Address	Phone Number	Contact Preference		Phone Other _	□ E-mail	

Upon receipt of the complaint, the Board will review the complaint at its next regularly scheduled Board meeting. The complainant will be notified of this Board meeting. The Board will make a decision in an expeditious manner. Once a determination has been made by the Board, the decision will be sent by certified mail to the complainant.

If, after the Board's consideration and review of the complaint, the Board issues a final decision adverse to the complaint, you have the right to file a notice of final adverse decision with the Common Interest Community Board (CICB) in accordance with the regulations promulgated by the CICB. The notice shall be filed within 30 days of the date of the final adverse decision, shall be in writing on forms provided by the Office of the Common Interest Community Ombudsman (Ombudsman), shall include copies of any supporting documents, correspondence and other materials related to the decision, and shall be accompanied by a \$25 filing fee. The Ombudsman may be contacted at:

Office of the Common Interest Community Ombudsman Department of Professional and Occupational Regulation 9960 Mayland Drive, Suite 400 Richmond, VA 23233 804/367-2941 CICOmbudsman@dpor.virginia.gov

There is no cost associated with requesting a copy of a complaint from the EHCA Board. The Board reserves the right to charge a reasonable fee for future copies if subsequent requests are made.

The complaint process and this complaint form may be downloaded at www.evergreenheights.net.