

# HOMEOWNER ASSOCIATION CONCERN FORM

Association Name: \_\_\_\_\_

Unit # \_\_\_\_\_

Name: \_\_\_\_\_

Date Submitted: \_\_\_\_\_

Home Phone #: \_\_\_\_\_

Work #: \_\_\_\_\_

Nature of Concern:

Landscaping

Roofing

Painting

Irrigation

Lighting

Noise

Pool

Parking

Tennis Court

Pets

Dumpsters

Other

Street/Walk/Drive

Exterior Building Maintenance

Explain Below: Please be as specific as possible, including (when necessary) building numbers, street names, etc. to help assist in locating the problem.

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Sign & return this form by mail, fax, email or drop it off with the information provided below. Your concerns will be passed along to the appropriate committees. Please retain a copy of this form for your records. Additional forms are available upon request.

Name (Please Print): \_\_\_\_\_

Signature: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Date: \_\_\_\_\_

\*Name & signature must appear.

**Keystone Property Management**  
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**Greenville, NC 27836**  
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**Fax: 252-353-4314**