

PLEASE PRINT

COMPLAINT NUMBER _____

**SURFSIDE HOMEOWNERS ASSOCIATION
COMPLAINT FORM**

FOR OFFICE USE ONLY

DATE RECEIVED BY OFFICE: _____

TYPE OF COMPLAINT: TREE ARCHITECTURAL GENERAL RV

COMPLAINT AGAINST: DIVISION: _____ BLOCK: _____ LOT: _____

SURFSIDE PROPERTY ADDRESS: _____

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE NUMBER: _____

REFERRED TO: _____ DATE: _____

COMPLAINT: _____

DATE REVIEWED: _____

COMMENTS: _____

DATE REVIEWED: _____

COMMENTS: _____

FILE CLOSED: _____ BY: _____

**PLEASE PRINT
(TO BE COMPLETED BY COMPLAINANT)**

DATE: _____

AGAINST STREET ADDRESS: _____

DIVISION: _____ BLOCK: _____ LOT: _____

PLEASE DESCRIBE COMPLAINT IN DETAIL:

(If necessary attach an additional sheet)

Follow up on your tree complaint online at <https://www.surfsideonline.org/wp-content/uploads/2011/02/Tree-Complaint-updates-online-2017.pdf>

COMPLAINANT CONTACT INFORMATION (CONFIDENTIAL):

NAME: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE NUMBER: _____

WOULD YOU LIKE AN EMAIL THAT LETS YOU KNOW THE COMPLAINT NUMBER FOR YOUR ONLINE FOLLOW-UP? (TREE COMMITTEE COMPLAINTS ONLY) _____

EMAIL ADDRESS _____

SIGNATURE: _____