

Laredo at Parkside Homeowners Association

HOMEOWNERS RESPONSE FORM

DATE _____

(Please return to Teleos Management Group)

Name: _____ Phone: _____

Unit Address: _____

Homeowner's Address (if different) _____

Please check below which situation applies to you and provide details

Report a Violation

What _____

Where _____ Date Observed _____

Respond to a violation letter dated _____

Details _____

Request information about

Details _____

You have the right to, within 14-days from the date of the violation letter, request a hearing at the next HOA Board meeting to discuss your violation and/or fine. Check the appropriate box.

Request hearing

Do not request hearing

Owner Signature