



AVR

AVOID VERBAL REQUEST

Date: _____

Unit Owner's Signature: _____

Print Name: _____

Bldg. #: _____ Unit #: _____ Phone#: _____ Email: _____

This form is to be used when presenting requests, comments, or suggestions etc. that require consideration by the Home Owners Association. Information will only be shared with Board members. Please make the information legible.

DEPOSIT THIS FORM IN OUR OFFICE DROP BOX LOCATED NEXT TO THE CONDO MAILBOXES.
(DO NOT take to the Summerplace Clubhouse.)

[illegible]