

**Wellington Homeowners Association  
Covenants Violation Report Form**

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

Address Violation Location: \_\_\_\_\_

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(Please list the property address or if it is a common area, the nearest cross street)

Type of Violation: \_\_\_\_\_

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\*Name of Complainant: \_\_\_\_\_

\*Address of Complainant: \_\_\_\_\_

\*Phone # of Complainant: \_\_\_\_\_

\*Email Address of Complainant: \_\_\_\_\_

(\* Optional Information)