

## MEMBER REQUEST/COMPLAINT FORM

Please email this form to hello@kenrockcountryestate.co.za for matters that requires HOA assistance or intervention.

rease chair this form to horiogical occupancy estate.co.zu for matters that requires 17071 assistance of intervention.							
Members Name:							
Street Address:							
Telephone:							
Member type: (please tick)			Owner   Te	enant	☐ Other (specify)		
Nature of request/complaint: (Please tick)			Common Property	/ [	Private Property	□ Nuisance	
			Improvement		Maintenance	□ Vegetation	
			Risk		Building Compliance		
Against whom is the request/complaint: (Please include address, if relevant)							
Description: (Please attach supporting material)							
Has the request/complaint been raised with the resident involved?			□ Yes □ No				
Signature of Requester/Complainant: Date:							
Duto							
ASSESSMENT BY ESTATE MANAGER/BOARD OF TRUSTEES							
Date:	Action:			Desc	iption		

Date:\_\_\_

Signature of Estate Manager/Trustee:\_\_\_\_