

Date received: \_\_\_\_\_

Case number: \_\_\_\_\_

## Rules Committee Form

Please mail completed form to:  
Margaret's Walk Homeowner's Association, Inc.  
475 West Town Place  
Suite 200  
St. Augustine FL 32092

*\*\* Complaints by phone will not be addressed and verbal complaints will not be accepted.*

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**Source of infraction** (MWHOA or FIP Deed and Covenants) Please include page number, article number, and section number: \_\_\_\_\_

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**Dates infraction occurred:** \_\_\_\_\_

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**Lot number or street address** (no names, please): \_\_\_\_\_

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**Comments/ Any course of action previously taken by complainant:** \_\_\_\_\_

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**Date:** \_\_\_\_\_ **Signature** (optional): \_\_\_\_\_