## The Village at Innsbrook

Po Box 3502

Glen Allen, VA. 23058-3502

www.thevillageatinnsbrook.com

## Association Complaint Form

Pursuant to Chapter 29 of Title 55 of the Code of Virginia, the Board of Directors (Board) of the Village at Innsbrook (Association) has established this complaint form for use by persons who wish to file complaints with the Association regarding the action, inaction or decision by the governing board, managing agent or association inconsistent with applicable laws and regulations.

resolution of the issues described in t circumstances at issue and the provise attach a separate sheet of paper to thi	nt in the area provided below, as well as the re- the complaint. Please include reference to spec- tions of Virginia laws and regulations that supp- s complaint if there is insufficient space. Attaconther materials related to this complaint.	rific facts and/or port the complaint. Please
Sign, date and print your name and address listed above.	ddress below and submit this completed form	to the Association at the
Printed Name	Signature	Date
	Mailing Address	
	Lot/Unit Address	
E-Mail Address	Phone Number	

If, after the Board's consideration and review of the complaint, the Board issues a final decision adverse to the complaint, you have the right to file a notice of final adverse decision with the Common Interest Community Board (CICB) in accordance with the regulations publicized by the CICB. The notice shall be filed within 30 days of the date of the final adverse decision, shall be in writing on forms provided by the Office of the Common Interest Community Ombudsman (Ombudsman), shall include copies of any supporting documents, correspondence and other materials related to the decision, and shall be accompanied by a \$25.00 filing fee. The Ombudsman may be contacted at:

Office of the Common Interest Community Ombudsman

Department of Professional and Occupational Regulation

9960 Mayland Drive, Suite 400

Richmond, VA. 23233

Ph: 804-367-2941

CICOmbudsman@dpor.virginia.gov