

Covenants, Conditions and Restrictions Violation Form

Spring Mills Unit Owners' Association

Note: Your name and other personal information will not be revealed to the alleged violator. We only need this information in case we need to contact you for further details of the alleged violation. (* required information)

*Your Name _____ *Date (mm/dd/yyyy) _____

*Street & Number _____

*City _____, State _____ Zip _____

Note: Only those who own property in Spring Mills Subdivision may submit code violation reports. If the above address is not in Spring Mills, please list the address of the property in Spring Mills that you own:

Street Number _____, Falling Waters, WV 25419

*Your Telephone Number _____

*Your Email Address: _____

Alleged Violator's Name (if known) _____

Alleged Violator's Address _____, Falling Waters, WV 25419

*Detail the facts and circumstances of the alleged violation of the covenant, condition or restriction, and date(s) of the alleged violation - continue on back if needed.

*List the section of the Declaration of Covenants, Conditions and Restrictions of Spring Mills Subdivision or the rule or regulation that you believe is being violated by such facts and circumstances:

Return to:

Spring Mills Unit Owner's Association
115 N. Queen Street
Martinsburg, WV 25401
304-596-6630
Email info@springmills.org

****All personal information will be confidential and not disclosed.**

Signature _____