

# *Casa Di Amici Condominium Association*

## **Deed Restriction Violation Form**

Location where violation occurred \_\_\_\_\_

Unit owner or tenant (if known) \_\_\_\_\_

Date of violation \_\_\_\_\_

Nature of violation \_\_\_\_\_

Specific CDA Declaration Article No. (if known) \_\_\_\_\_

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*The following information is required and will be held in the strictest of confidence.  
It will not be divulged without your consent.*

Your name \_\_\_\_\_ Unit number \_\_\_\_\_

Daytime phone \_\_\_\_\_ Evening \_\_\_\_\_

### For Management Company Use Only

\_\_\_\_\_  
Board member verifying Deed Restriction violation

\_\_\_\_\_  
Board member(s) concurring

\_\_\_\_\_, 20  
Date