

**Ozark Heights Homeowners Association**  
**Covenant Violation Complaint Form**

Address of Violation:

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Name of Resident Where Violation is Occuring (if known):

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Nature of Violation(s):

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**Your Contact Info:**

First Name(s): \_\_\_\_\_

Street Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

**RETURN THE COMPLETED FORM TO:**

Via Email: Scan and email this form to: [board@ozarkheights.net](mailto:board@ozarkheights.net)

Via Mail: OHHA, 2603 N. Skyview Lane, Ozark, MO 65721