

# RANDOLPH PLACE RESIDENCES

165 N. Canal Street, Chicago, Illinois 60606

Phone 312/627-1332 Fax 312/627-1335

## VIOLATION COMPLAINT FORM

Use the Violation Complaint Form to document violations of the governing documents of Randolph Place Residences. Complete as much of this form as possible, and return it to the management office. If any information is unknown, indicate such. Use an additional sheet of paper if necessary. Please print legibly.

Your Name \_\_\_\_\_

Unit Number \_\_\_\_\_

Home Phone \_\_\_\_\_

Work Phone \_\_\_\_\_

Name of Alleged Violator \_\_\_\_\_

Unit Number \_\_\_\_\_

Date of Incident \_\_\_\_\_

Approx. Time of Incident \_\_\_\_\_

Noise

Parking Infringement

Inconsiderate Behavior

Maintenance

Pets

Trash/Garbage

Smoking/Nuisance

Other

Have you contacted the above regarding this incident? \_\_\_\_\_

Yes

No

Was Security contacted? \_\_\_\_\_

Yes

No

Guard's Name: \_\_\_\_\_

Explain in detail what happened. Give locations and all pertinent information.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I have made the above statement based on my own personal knowledge. I shall cooperate with the Randolph Place Residences in whatever agreement is reached regarding this incident.

Signature \_\_\_\_\_

Date \_\_\_\_\_

### Official Use

Name: \_\_\_\_\_ Date: \_\_\_\_\_ Doc. #: \_\_\_\_\_

Action Taken: \_\_\_\_\_

Follow Up: \_\_\_\_\_