

[www.StarlightBoynton.com](http://www.StarlightBoynton.com)

**Starlight Cove HOA Violation Form**

The Home Owners Association is committed to help protect and preserve the overall appearance of your community. One of the tasks of the Association is to respond to resident concerns. In keeping with this commitment, any community concern needs to be identified below and submitted to the Management Company, First Service Residential, or the Starlight Cove Violations Committee:

**Email:**                      [southernshoresinc@comcast.net](mailto:southernshoresinc@comcast.net)

**Mailing Address: Westchester C.C. HOA, c/o Southern Shores Management, 6801 Lake Worth**

**Rd., Suite 111 North Building, Greenacres, FL 33467**

**Office Phone:** 561-460-2619

-or-

**StarlightBoynton@gmail.com**

Reporting is anonymous. Please be advised that the violation must fall under the community covenants and restrictions. Once verified, every attempt possible will be made to resolve the issues identified, but please allow allotted time depending on the offense. When possible, please include a photo of the violation.

**Date:** Click here to enter a date.

**Address of Violation:** Click here to enter text.

**Description of Violation in Question:** Click here to enter text.

**Violations Committee Use Only**

Date Received: \_\_\_\_\_\_\_\_\_\_

Date of Inspection: \_\_\_\_\_\_\_\_\_\_

\_1st Violation \_2nd Violation \_3rd Violation

Reason Violation Exists:­­ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Covenant in Violation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

We, the Violation Committee, have reviewed the proposed violation. The facts surrounding the violation have been closely examined and a decision has been made. Violation Committee Approval: \_\_ Yes \_\_ No

Committee Initials: \_ \_ \_ \_ \_ \_

Action Required to be Taken: Action Required to be Taken: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Note: After decision has been made, this form will be sent to Associa for the appropriate action to be taken.*