

**WOOKDBROOK VILLAGE HOMEOWNERS ASSOCIATION**

c/o Coventry Group Community Management, Inc.  
P.O. Box 2580 Winchester, VA 22604 540-535-0816

**COMPLAINT FORM**

Pursuant to Chapter 23.3 of Title 54.1 of the Code of Virginia, the Board of Directors (Board) of the **WOOKDBROOK VILLAGE HOMEOWNERS ASSOCIATION** (Association) has established this complaint form for use by persons who wish to file written complaints with the association regarding the action, inaction or decision by the governing board, managing agent or association inconsistent with applicable laws and regulations.

Legibly describe the complaint in the area provided below, as well as the requested action or resolution of the issues described in the complaint. Please include references to the specific facts and circumstances at issue and the provisions of Virginia laws and regulation that support the complaint. If there is insufficient space, please attach a separate sheet of paper to this complaint form. Also attach any supporting documents, correspondence and other materials related to the complaint.

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Sign, date and print your name and address below and submit this completed form to the Association at the address listed above.

\_\_\_\_\_  
Printed Name                                  Signature                                  Date

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
Lot/Unit Address

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

Contact Preference:  Phone  Email  Other \_\_\_\_\_

If, after the Board’s consideration and review of the complaint, the Board issues a final decision adverse to your complaint, please be aware that you have the right to file a notice of final adverse decision with the Common Interest Community Board (CICB) in accordance with the regulations promulgated by the CICB. The notice shall be filed within 30 days of the date of the final adverse decision, shall be in writing on forms prescribed by the CICB, shall include copies of any supporting documents, correspondence and other materials related to the decision and shall be accompanied by a \$25.00 filing fee. The CICB’s contact information is:

Office of the Common Interest Community Ombudsman  
Department of Professional and Occupational Regulation  
9960 Maryland Drive, Suite 400  
Richmond, Virginia 23233  
(804) 367-2941  
CICombusdman@dpor.virginia.gov