



# Pine Trails Community Improvement Association

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## COMMUNITY CONCERNS, SUGGESTIONS & COMPLAINTS

**Directions:** Specifically state your concern(s), include an address of the concern and any pictures that will assist in solving your concern. You will receive a copy of this form after it is turned in. The Board of Director that will investigate your concern will get back with you within 48 hours after receipt of this form.

Please fill out the form below in its entirety.

Date \_\_\_\_\_

Name \_\_\_\_\_ Cell \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Concern \_\_\_\_\_  
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Thank You

Cindy Joseph, President

Pine Trails Board of Directors