

**WE CARE ABOUT YOU!!
WE WANT TO HEAR YOUR COMMENTS!!!!!!**

**THE RESIDENCES ON HOLLYWOOD BEACH
COMMUNICATION FORM**

Date: _____ Building # _____

Unit # _____

Resident's Name: _____

Type of Request: _____

Recommendation: _____

Complaint: _____

Resident is Owner: _____ Renter: _____

e-mail address: _____

Home Phone: _____

Work/Cell Phone: _____

Resident Communications: _____

Resident Signature: _____

Received by: _____ Date: _____

Date of Response: _____

Response/Action Taken: _____

Copies/Follow Up: _____