Renaissance Community Partners Appeal Request Form

Submit to:	Renaissance Community Partners	Date:
	633 E. Ray Road #122 Gilbert, AZ 85296 480-813-6788 Fax 480-545-6196	Lot/Account #:
Contact Information:		Name:
Community: Higley Groves HOA		Email:
Address:		Telephone:
Nature of Ap	peal: Please select the type of appea	I desired.
 ☐ Written Appeal (The board will consider your letter at an upcoming Executive Board Meeting) ☐ In-Person Appeal (You will be scheduled to meet with the board in-person at the date specified) 		
What are you	ı Appealing:	
your account **In order for must be curr	ollections charges (i.e. demand notices, i are costs the Association has already inc r an appeal to be successful regarding	osts
appropriate: the Board of I	Use this form to provide background info	rd and any background information you deem ormation explaining why you are requesting help from equesting. Please remember you are writing your effective.

You may also write on the reverse side or include a separate letter.