



Oceanside Community Association
550 Vista Bella, Oceanside CA 92057
760-757-3937 Phone
760-757-8177 Fax
www.oceanaseniors.org
Email: office@ocaoffice.org

COMPLIANCE REQUEST

Complete this form in its entirety in order for OCA to proceed with notifying the homeowner. Incomplete forms will not be processed. If possible, all information received will be kept confidential but is not guaranteed. It will be revealed if the complaint results in a Board of Directors hearing.

Your name _____ Unit _____ House # _____

Email _____ Phone (_____) _____

Property you are reporting Unit _____ House # _____

Date ____/____/____ Name (if known) _____

Have you spoken to the person? Yes / No

What rule within the Governing Documents do you believe is in violation?

Occurrence Description _____

OCA Use

Signature _____

Date ____/____/____