## 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:		Email:
Address:		Telephone:
Nature of Ap	peal: Please select the type of appea	I desired.
		r letter at an upcoming Executive Board Meeting) neet with the board in-person at the date specified)
What are you	ı Appealing:	
	ollections charges (i.e. demand notices, i	osts
must be curr		ງ late fees and collection costs a homeowner In order for an appeal to be successful regarding
Please expla	in what you are requesting of the boa	rd and any background information you deem
the Board of I		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.