

SHADOW LAKES II ASSOCIATION

OWNER COMPLAINT-RESOLUTION POLICY

(Adopted Pursuant to the Illinois Ombudsperson Act, 765 ILCS 615/1 et seq.)

1. PURPOSE

The purpose of this Complaint-Resolution Policy is to establish a uniform process by which Unit Owners of Shadow Lakes II Association ("Association") may submit complaints to the Association and receive a timely, written response in compliance with the Illinois Condominium and Common Interest Community Ombudsperson Act (the "Act").

2. DEFINITIONS

Complaint: A written submission from a Unit Owner alleging a violation of the Illinois Condominium Property Act or the Association's governing documents by the Association or its Board.

Complainant: A current Unit Owner of the Association submitting a Complaint.

Board: The duly elected Board of Directors of the Association.

Final Decision: A written response issued by the Board or its designated representative, marked as the "Final Decision," that addresses the merits of the Complaint and concludes the internal complaint process.

3. SUBMISSION OF COMPLAINTS

All Complaints must be submitted in writing using the Association's Owner Complaint Form (attached hereto as Exhibit A). Complaints must include:

1. The full name and unit address of the Complainant;
2. A detailed description of the nature of the Complaint, including the specific provision(s) of the Association's governing documents or the Condominium Property Act allegedly violated;
3. Supporting documentation, if any;
4. A statement of the remedy or relief sought;
5. The Complainant's signature and date.

Complaints may be submitted by:

- Email to the Association's property management company at: [Insert Email Address], or
- Mail or hand delivery to:

Shadow Lakes II Association

[Insert Management Company or Board Address]

[City, State, ZIP]

4. ACKNOWLEDGEMENT OF RECEIPT

Within 14 days of receipt, the Association shall provide the Complainant with written acknowledgment of the Complaint, confirming the date it was received and stating that a Final Decision will be issued within 180 days, unless extended by mutual agreement.

EXHIBIT A

OWNER COMPLAINT FORM

(Pursuant to Section 35 of the Illinois Ombudsperson Act)

Name: _____

Unit Address: _____

Phone Number: _____

Email Address: _____

Date of Complaint: _____

Describe the Complaint (include specific alleged violation of governing documents or law):

Requested Relief or Resolution:

Supporting Documentation (attach): ☐ Yes ☐ No

Signature: _____

Date: _____