

Baxter Management Group

Maple Woods HOA
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ARCHITECTURAL VIOLATION REPORT

Address of Property: _____

Date Reported: _____

Violation:
(Description) _____

Guideline Violated: _____

Correction Required: _____

.....
Reported By: _____

Address: _____
.....

FOR OFFICE USE ONLY:

Date Received: _____
Letter Sent: _____
Deadline Date: _____
Signed: _____

ARC COMMITTEE:

Inspection Date: _____
Second Letter: yes _____ no _____
Signed: _____

