

HOMEOWNERS ASSOCIATION (HOA) PETITION REQUEST FORM

Use this form to begin the HOA Dispute Process with the Department of Real Estate. This completed application must be accompanied by a copy of the condominium or planned community documents that are at issue in this matter.

Once complete, the application and additional documents should be submitted through our [Message Center](#).

PETITIONER INFORMATION (Party Filing the Petition)			
Homeowner or Association Name:			
<input type="checkbox"/> Homeowner	<input type="checkbox"/> Condominium/Community Association	<input type="checkbox"/> Planned Community Association	
Address:			
City:	State:	ZIP:	
Phone:		Email:	

SUBJECT PROPERTY (If different than Petitioner address)			
Address:			
City:	State:	ZIP:	

PETITIONER'S ATTORNEY INFORMATION (if applicable)			
Attorney Name:		Law Firm:	
Address:			
City:	State:	ZIP:	
Phone:		Email:	

RESPONDENT INFORMATION (Opposing Party)			
Homeowner or Association Name:			
<input type="checkbox"/> Homeowner.	<input type="checkbox"/> Condominium/Community Association.	<input type="checkbox"/> Planned Community Association.	
Address:			
City:	State:	ZIP:	
Phone:		Email:	

ISSUE(S)			
Has a lawsuit been filed regarding this matter?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Number of issue(s) claimed in this petition:			
<input type="checkbox"/> One (1) - \$500.00	<input type="checkbox"/> Two (2) - \$1,000.00	<input type="checkbox"/> Three (3) - \$1,500.00	<input type="checkbox"/> Four (4) - \$2,000.00
Alleged violation (check box and provide reference of the violation, this must be completed):			
<input type="checkbox"/> Condominium Statutes (example. A.R.S. § 33-1243):			
<input type="checkbox"/> Planned Community Statutes (example. A.R.S. § 33-1809(A)(1)):			
<input type="checkbox"/> Bylaws (Example: Article 4.1(a)):			
<input type="checkbox"/> CC&Rs (Example: Article 4, Sec. 4.1):			
Relief Requested - Other than ordering Respondent to reimburse the filing fee required by A.R.S § 32-2199.01, if the Petitioner prevails, Petitioner requests that the following relief be awarded by the Office of Administrative Hearings. Please select all that apply.			
<input type="checkbox"/> Order Respondent to abide by the Arizona statute specified in the complaint section.	<input type="checkbox"/> Order Respondent to abide by the section(s) of the condominium/planned community document(s) specified.	<input type="checkbox"/> Impose a civil penalty based on the violation specified. (Penalties, if granted, are awarded to the State, not the Petitioner).	
Description. Use this space to provide a one (1) sentence statement of the violation(s) for each issue claimed. Include within the statement the specific rule or statute that is allegedly in violation, the factual basis for the violation you are alleging, and the date and time of the alleged violation(s).			

SIGNATURE	
Under penalty of perjury, I swear that this complaint is true and accurate to the best of my knowledge.	
Petitioner Name:	Date:
Petitioner Signature:	