



**SOUTH TIMNATH**  
METRO DISTRICT

## Covenants Control Form

Today's Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Complete this form then scan/e-mail to **South Timnath Metro District**.

This form is when you see an issue in the neighborhood and have concerns or questions about the covenants. If you're not sure about the jurisdiction of the issue, you can still send this form to **South Timnath Metro District**. **South Timnath Metro District** can investigate the issue. YOU MUST COMPLETE THIS FORM IN FULL WITH YOUR NAME, ADDRESS, AND PHONE NUMBER. Complaints are not anonymous.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Number: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Message/Concern:**

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