



RETURN THIS FORM TO:
(Devuelva Este Formulario a):
OFFICE OF COMMON INTEREST COMMUNITY OMBUDSMAN

FOR OFFICIAL USE:
(Para Uso Oficial)

DEPARTMENT OF JUSTICE
STATE OF DELAWARE
820 N. FRENCH STREET, 5TH FLOOR
WILMINGTON, DE 19801
Phone: (302) 577-8600 or 1-800-220-5424
(Teléfono)
Fax: (302) 577-6499
Email: CIC.OmbudsmanDOJ@state.de.us
(Correo electrónico)

CIC#: _____
(Caso No)

COMMON INTEREST COMMUNITY – CONTACT and COMPLAINT FORM*
(Declaración de Querrela)

Your Name:
(Su Nombre):

Name of Person or Business Complaint is Against:
(Nombre de Persona o Empresa):

Your Home Address:
(Su Dirección):

Location:
(Ubicación):

Number and Street (Número y Calle)

Number and Street (Número y Calle)

Development (Urbanización)

City (Ciudad)

City (Ciudad)

State and Zip Code (Estado y Código Postal)

Phone Numbers (Teléfonos):
Home (Hogar): _____

Work (Trabajo): _____

State and Zip Code (Estado Y Código Postal)

Phone Number (s) (Teléfono): _____

Email Address (Correo Electrónico): _____

Email Address (Correo Electrónico): _____

DO NOT FILE A COMPLAINT UNLESS YOU HAVE COMPLETED THE INTERNAL DISPUTE RESOLUTION PROCESS (IDR)

INSTRUCTIONS

PLEASE READ THROUGH THIS FORM CAREFULLY, BEFORE STARTING

Definition: The term “Community” and “common interest community” mean the same thing in this Form. The Community includes you if you are:

- An owner of a Unit of real estate, and
 - your Unit is in a planned community, planned development, condominium, cooperative, or maintenance corporation;
 - your Community is subject to a plan described in the governing documents of your Community, (such as a Declaration, deed restrictions, Bylaws or rules) and because of your ownership, you are obligated to pay a share of taxes, insurance and other costs; and
 - the costs are for funding, managing and supervising common areas that are available to all members of the Community, such as parks, pools, playgrounds, club houses, open spaces, private streets, etc.

The Community also includes:

- The Developer, also known as the “Declarant;” and
- Your neighborhoods’ governing Association, no matter what is called, for example:
 - Planned community association or council;
 - Homeowners association or council;
 - Condominium association or council;
 - Cooperative association or council;
 - Community maintenance corporation, association or council; or
 - Other similar organization, no matter how it is named.
- Any other interested party.

1. You may Contact the Office of the Ombudsperson to make an INQUIRY; a REQUEST FOR SERVICE; or submit a COMPLAINT if you are:

- a Unit Owner in your Community, or
- a Declarant; or
- a Community Association member; or
- an executive board of a Community Association; or
- any other interested party;

and your complaint concerns potential violations of the law, Bylaws, Rules, regulations, or documents governing your Community.

2. DO NOT FILE A COMPLAINT BEFORE YOU COMPLETE THE INTERNAL DISPUTE RESOLUTION PROCESS of your Community’s Association or one established by the Ombudsperson. This is required by the Ombudspersons Act. You must include a copy of the final determination of the Association with the Complaint that you wish to file with the Ombudsperson, AND a \$35 Filing Fee Payable to “DOJ-CIC Ombudsman”.

3. You must also attach to your **INQUIRY, REQUEST FOR SERVICES, or COMPLAINT:**
- a. the Declaration or deed restrictions creating your Community,
 - b. the Bylaws of your Community, and
 - c. the Rules of your Community and
 - d. any other document or evidence supporting your Inquiry, Request For Service, or Complaint.
4. The Ombudsperson is **not** the attorney for: You, Unit Owners, Declarants, Community Associations, the executive board of a Community Association, or any other interested parties.
- **No attorney-client relationship is implied or created by the Ombudsperson's contact with you or any person, and the Ombudsperson may not act as your attorney in a legal action brought by you or any other person.**
 - **The Office of the Attorney General and the Office of the Ombudsman cannot provide legal advice, or legal interpretation. We can only provide general, nonbinding explanations of laws and regulations governing common interest communities.**
 - **The goal of the Office, and its statutory responsibility is to:**
 - educate the public;
 - direct you to available Community resources;
 - review final adverse decisions from your Association; and
 - help unit owners and associations avoid lawsuits and resolve problems informally, through meetings, mediation or arbitration.

The Office and the Ombudsperson cannot, however, replace the services of an attorney representing a unit owner's or Association's particular interest.

5. Please attach **COPIES, not originals, of all papers that relate to your Inquiry, or Complaint, including REQUIRED INFORMATION as well as papers such as Notices, advertisements, photographs, contracts, receipts, bills, cancelled checks, written agreements, letters or emails.** (Envíe copias, no originales, de todos los documentos en relación con esta querrela, inclusive contratos, fracturas, recibos, cheques cancelados, cartas o correo electrónico).

REQUIRED INFORMATION

The Common Interest Community Ombudsperson Law (29 Del C. §2945) requires that you provide the following information:

1. Are you a person or one of the following types of organizations? Check all that apply:

A Unit Owner (a homeowner) in a Community?

A person, or family member who owns a residence in a planned Community?

A "Declarant" (or developer) who still owns a Unit that is created by the Declaration or deed restrictions (the Governing documents)?

A person leasing a unit; **and** all of the following are **true**:

- your lease will expire when your landlord's lease expires; **and**
- your lease is longer than 20 years, **and**
- your lease is not for a membership campground?

A Declarant?

A Community Association?

The executive board of a Community Association?

A member or representative of the executive board of a Community association?

A person otherwise interested? If so, please describe your interest:

2. **Reason You Are You Contacting the Office of the Ombudsperson:**

To make an **INQUIRY**? If so, please state your inquiry and its surrounding circumstances in the "Narrative" section of this form. Please keep in mind that the Office of the Attorney General and the Office of the Ombudsman cannot provide legal advice, but can only provide general nonbinding explanations of laws and regulations and documents, governing common interest communities. There is a fee of \$35 to file an Inquiry.

To **REQUEST SERVICES**? The following services are authorized by the Law:

Provide election monitors and vote counting for fair Community Association elections? (Requires 15% of the voting interests, or 6 Unit Owners, whichever is greater, and a fee.)

Provide assistance in understanding the rights, responsibilities and processes available to you through general, nonbinding explanations of laws, regulations, and governing documents governing common interest communities, in general terms, that does not require review of your governing documents.

Conduct a meeting to educate Community members about their rights and responsibilities, and the processes available under law, regulations, and rules.

Provide meetings, mediation, arbitration, or other forms of alternative dispute resolution as requested for disputes other than Complaints. There is a filing fee of \$35, and fees for the mediators time and expenses.

Describe any other service you seek. We will review your request and determine whether it is within the authority of the Office of the Ombudsperson or other unit or agency.

To file a **COMPLAINT** that has been through your Community Association's or the Ombudsperson's Internal Dispute Resolution Process? Attach a copy of the Association's Final Decision, or statement that the request was ignored. Are you seeking:

- Meeting or Conciliation?
- Mediation?
- Arbitration that is binding?
- Arbitration that is non-binding?
- Other? Please describe:

ATTACH A CHECK FOR THE FILING FEE OF \$35.00 PAYABLE TO "DOJ-CIC OMBUDSMAN"

3. Please provide the following information required by the Ombudsperson's Law:

(1) Contact information for the Community Association:

Name of Association: _____

Contact person: _____

Address: _____

Telephone: _____

Mobile: _____

Fax: _____

Email: _____

Any Other Contact information: _____

(2) Contact information for the property manager or the name of the person who manages the property of the Community.

Name: _____
Contact person: _____
Address: _____
Telephone: _____ Mobile: _____
Fax: _____ Email: _____
Any Other Contact information: _____

(3) Contact information for the executive board of the Association.

Name: _____
Contact person: _____
Address: _____
Telephone: _____
Mobile: _____
Fax: _____
Email: _____
Any Other Contact information: _____

(4) Contact information for the Declarant or developer.

Name: _____
Contact person: _____
Address: _____
Telephone: _____
Mobile: _____
Fax: _____
Email: _____
Any Other Contact information: _____

(5) Please attach all of the following Required Information to this Form. (These documents should be available to you from the Community Association, upon request):

- The final decision of the Community Association on your complaint;
- The Declaration;
- The Bylaws;
- The Rules for the Community;
- The annual budget adopted by the Community Association.
- Any other documentation or evidence that supports Your Inquiry, Request or Complaint, including if appropriate: meeting notices, minutes of Association or executive board meetings, correspondence, bills receipts, photographs, advertisements for the community, as examples.

(6) State when your community was created or approved.

Month _____ Day _____ Year _____

(7) State the number of Units in your Community.

(8) State the amount of the annual assessment made by your Community Association.

SPECIFIC DETAILS IF PERTINENT TO YOUR COMPLAINT OR CONTACT:

(9) What date did you purchase your Unit? _____

Please attach a copy of your purchase contract and all related papers.

(10) Who was your Sales Agent? Name, Firm, Address, Telephone, Email:

(11) Did you obtain advertising information about the Community, or its features? What did you receive:

Please attach a copy of any advertising of the Community, and its features that you relied upon, and any current advertisement of the Community. Please describe information you were told if there is no document:

(12) Were you represented by an attorney at Settlement? Name:

ADDITIONAL INFORMATION

Have you complained to the Unit Owner or Community Association? [] YES [] NO
(If yes, to whom?)

What was the response?

Have you made a complaint with any other governmental or regulatory agencies?
[] YES [] NO

If yes, who? _____ Which agency? _____

At what address? _____

Please provide the names, telephone numbers, and addresses of persons needed as witnesses.

Please provide the names, telephone numbers, and addresses of other known persons affected.

Does an attorney represent you in this matter? [] YES [] NO
If yes, provide attorney's name and address:

Have you or anyone else filed a lawsuit against anyone regarding this complaint?
[] YES [] NO

If yes, provide name of court and names of the parties:

Case number: _____ Date case filed: _____
Attach copies of the court documents to this complaint.

READ THE FOLLOWING CAREFULLY BEFORE SIGNING BELOW:(Favor de leer lo siguiente cuidadosamente antes de firmar):

- **I have attached copies of all papers that relate to this complaint.** (He fijado copias de todo documento relacionado con esta querrella).
- **I understand that in order to successfully handle this complaint the Office of the Ombudsperson may need to send this complaint to the person, organization or firm that I have complained about.** (Yo entiendo que para investigar esta querrella, la Unida de Protección al Inversor tiene que enviar esta querrella a la persona o empresa por cual yo he formulado cargos).

**YOU MUST CHECK ONE OF THE FOLLOWING:
(FAVOR DE INDICAR UNA DE LAS SIGUIENTES):**

____ You have my permission to send this complaint to the person, organization or business named in my complaint. (Autorizo que envíen esta querrella a la persona o empresa por cual yo he formulado cargos).

____ You **DO NOT** have my permission to send this complaint to the person or business named in my complaint. (**No autorizo** que envíen esta querrella a la persona o empresa por la cual yo he formulado cargos).

The information contained in this complaint is true to the best of my knowledge.
(La información incluida en esta querrella es correcta según mi mejor conocimiento).

FOR COMPLAINTS

I have attached a completed copy of the Internal Dispute Resolution complaint, and the complete response to it.

I have enclosed a check in the amount of \$35.00 payable to: “DOJ-CIC Ombudsman” for the filing fee.

Signature
(Firma)

Date
(Fecha)

Please be advised that Attorney General’s Office including the Office of the Ombudsperson is prohibited by law from giving you legal advice, legal opinions, or acting as your private attorney. Therefore, you may wish to consult with a private attorney to discuss your legal rights and remedies.

SUBMIT

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