

Homeowner Request Form

Today's Date:

Your Name:

Address/Unit #:

Home Phone:

Work Phone:

If unit is not owner occupied:

Tenant Name:

Home Phone:

Work Phone:

Your Request:

Please fill out the form, save and email to management@sylvanheightscondos.com . You can also print out the form and drop off your request either at the clubhouse mail slot (to the right of the doors on the wall as you approach) or mail it the address:

Sylvan Heights Homeowners Association

7600 SW Barnes Rd.

Portland, Oregon 97225

We will attend to your issue as soon as possible, thank you for taking the time to fill out this form completely.