PATHWAYS OF COMPLAINTS: INTRO

- Training Officers:
- Dre Anderson
- Andrei Tcacenco

# WHAT DO YOU KNOW ABOUT THE OMBUDSMAN'S OFFICE?

Introductions/Icebreaker

**Definitions and Topics** 

Intro to Intervention Affidavit, Alternative Dispute Resolution, and Statement of Facts

The Alternative Dispute Resolution Process

### AGENDA

BEFORE WE BEGIN, YOU ARE REMINDED THAT, AS TRAINING OFFICERS, WE ARE HERE TO PROVIDE GENERAL INFORMATION AND EDUCATION ON NRS/NAC 116, 116A, 116B AND NAC 38. WE DO NOT PROVIDE LEGAL ADVICE, INTERPRET THE LAW, OR GIVE OPINIONS ON INDIVIDUAL CIRCUMSTANCES.

OUR GOAL IS TO IS TO HELP YOU LEARN, UNDERSTAND, AND APPLY THE RELEVANT STATUTES, REGULATIONS, AND YOUR COMMUNITY'S CC&RS. WE WANT TO EQUIP YOU WITH THE KNOWLEDGE AND TOOLS NECESSARY TO EFFECTIVELY MANAGE AND LIVE WITHIN YOUR COMMON-INTEREST COMMUNITIES.

WE WILL HAVE DEDICATED TIME FOR QUESTIONS AND ANSWERS TOWARDS THE END OF THE CLASS. PLEASE NOTE THAT THE Q&A SESSION IS INTENDED TO CLARIFY THE MATERIAL COVERED TODAY AND NOT TO ADDRESS SPECIFIC ISSUES YOU MIGHT BE FACING. FEEL FREE TO JOT DOWN ANY QUESTIONS REGARDING THE CLASS THAT YOU MAY HAVE AS WE GO ALONG, AND WE WILL ADDRESS THEM DURING THE Q&A PERIOD. FOR ONLINE LIVE CLASSES: PLEASE ENSURE YOUR WEBEX DISPLAY NAME IS THE NAME YOU WANT YOUR CERTIFICATE OF ATTENDANCE TO BE ISSUED IN.

#### **LEARNING OBJECTIVES**

- By the conclusion of this class, you will:
  - Be able to define the major terms from Pathways of Complaints.
  - Learn the basics of the three possible Pathways of Complaints, including Intervention Affidavit, Alternative Dispute Resolution, and Statement of Facts.
  - Understand the required steps and the process for filing an Alternative Dispute Resolution (ADR) form.



#### **COMPLAINANT/CLAIMANT**

- A complainant is any individual aggrieved by an alleged violation of NRS 116 (116.760), 116A (116A.400) or 116B (116B.510).
- A claimant is any individual who participates in the Alternative Dispute Resolution process, as covered later.

#### THE RESPONDENT

According to NRS 116.085, a respondent means a person against whom:

An affidavit has been filed pursuant to <u>NRS 116.760</u>. A complaint has been filed pursuant to <u>NRS 116.765</u>.

What does this mean?



### **IN "PLAIN" LANGUAGE**

The respondent is the individual who allegedly committed the violation or is being asked to participate in one of the upcoming processes to address the allegation. ►NRS 116.035: "Declarant" means any person or group of persons acting in concert who:

As part of a common promotional plan, offers to dispose of the interest of the person or group of persons in a unit not previously disposed of; or

Reserves or succeeds to any special declarant's right.

### **POTENTIAL PATHWAYS**





# WHAT IS ADR? (ALTERNATIVE DISPUTE RESOLUTION, FORM 520)

#### Purpose of ADR

#### **Referee vs Mediator**

ADR exists for parties with a dispute involving the interpretation, application, or enforcement of the governing documents or the procedures for increasing or decreasing the assessments:

- Any covenants, conditions or restrictions, or any other governing documents applicable to the residential property.
- No statute of limitations.

Referees are licensed attorneys approved by the Division to hear disputes based on evidence.

 Unlike referees, mediators are certified and approved by the Division to promote agreement and compromise.

	STATE OF NET DEPARTMENT OF BUSINESS AND INDUS DMBUDSMAN FOR COMMON-INTEREST 3300 West Sabara Avenae, Suita 350, (702) 486-4840 / Toll (rec: (877) 859-4 E-mail: CICOmbudsman@rol.m.	TRY - REAL ESTATE DIVISION COMMUNITIES AND COMDOMINIUM HOTELS Las Vegas, Nevada 89102 907 / Fax: (702) 486-4520
/	ALTERNATIVE DISPUTE RESOLU	TION (ADR) CLAIM FORM
Date:	Signature	e of Claimant:
*Only one claimant p	er claim form is allowed for tracking pur	poses.
Claimant:		
*If individual, provide fo	dl name as it appears with the assessor's office in ora COMPLETE Association name as it appears e	fer to verify that you are a Unit Owner. If an Association, provide in the <u>Secretary of State's website</u> .
Law Firm and Attorney	y (if applicable):	
P	lease provide the name of the law firm and the name of	of the attorney. An attorney is not required,
Mailine Address:		
	Street and number, city, sta	te, and zip code
Phone Number:	Fax Number:	Email Address:
Respondent:		
		sociation name as it appears on the Secretary of State's websile.
	one party. Attach an Additional Respondent	Form 520B if there is more than one Respondent,
Mailing Address:		
Mailing Address:	Street and number, city, sta	te, and zip code
		te, and zip code Email Address:
Phone Number:		Email Address:
Phone Number: PLEASE	Fax Number: SELECT YOUR METHOD OF RESOLU "Claims involving multiple parties may be ex	Email Address: TION: Mediation Referee Program*
Phone Number: PLEASE **If all parties a Yes No Has th	Fax Number:	Email Address:
Phone Number: PLEASE **If all purties a [] Yes [] No Has th issues'	Fax Number:	Email Address: TION: [] Mediation [] Referee Program <sup>®</sup> calcolf from Re feeree Program. Ity subsidized by the Division, if funds are available. In Affidavit (Form 530) regarding the same or similar
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Phone Number: PLEASE **If all parties a PLEASE *If all parties a issues' INITIAL APPLICABLE Interv Interv Interv	Fax Number:	Email Address: Modiation Refere Porgram <sup>4</sup> calculations the Refere Porgram <sup>4</sup> (If subsidized by the Division, if fands are available, an Affidavit (Form 520) regarding the same or similar ADR Overview (Form 523). Som 530) has been filed with the Division based upper sion will not move forward with investigating the ndent choses Mediation, the chaim will default to

### **INTERVENTION AFFIDAVIT (FORM 530)**

#### (NRS 116.760)

- Used for complaints regarding NRS/NAC 116 or any other Division order, including but not limited to:
  - a. The election process.
  - b. Records access.
  - c. Meeting notifications.
  - d. Financial process.
  - e. Fining process.

May be filed against:

- Association officer/employee/agent.
- Board member.
- Unit owner.
- Has a statute of limitations of 1 year.

		(702) 486-4480 / <u>CICOmb</u>	hara Avenue, Suite 325, Las Vegas, NV 89102 Toll free: (877) 829-9907 / Fax: (702) 486-4520 udsman/dred.nv.gov / https://red.nv.gov	
		Interve	ention Affidavit (Form 530)	
			before filing this Affidavit. Please verify that you have met each e aggrieved party, you are attesting you:	INITIAL
1.			more than 1 year after you discovered or reasonably should have a 1 year, you cannot file this Affidavit).	
	Date alleged violation	on took place:		
2.		Respondent's last known otice, specifying in reaso	n address, allowing at least 10 business days, a certified return onable detail:	
	(a) all alleged v	iolations, which are ident	tical to the allegations listed on the Affidavit	
	(b) any actual d	lamages suffered; and		
	(c) any correcti	ve actions proposed		
3.			f the notice with the certified return receipt from the post office	
4.			sted in the certified notice and understand that any allegation not lavit will not be addressed by the Division.	
5.	Have in lieu of a not	tice, sent certified with re	tum receipt requested, the Intervention Affidavit, 🛄 Yes 🛄 No	
	If yes, the certified r	eccipt has been stapled to	o the Affidavit. Identify exhibits sent:	
6.	alleged violation(s)	of NRS/ NAC 116 and/o	e Respondent with at least 10 business days to address/correct the or the governing documents, and all other reasonable efforts to	ſ
7.	Have listed only on behind each alleged	e alleged violation on pa violation (use a separate	age 2 and included the applicable labeled attachments (Exhibits) page 2 for each alleged violation).	
8.	I understand once th	e Affidavit is submitted, th	the Division cannot provide me with a copy of my submittal	
			the Affidavit. Yes No If yes, name:	
ria	we mied an ADK clair	n or nugation involving u	the same anegation(s). Tes roo in yes, case number:	
ST	ATE OF NEVADA	COUNTY OF	DATE:	
		vledge have been aggrieve he governing documents of	(Complainant), after being first duly sworn, state under penalty of p d by an alleged violation of Chapter 116 of the Nevada Revised Statu of the Association.	perjury and ites, Nevada
1.	The person or entity	who committed the alleged	d violation and who was sent the required certified letter or certified A	Affidavit is (
	multiple, list each Re	spondent):		
2.	The Respondent(s) re	le in the community:		
	The name of the Asse	ociation where the alleged	violation took place:	
3.	The Association's Se	cretary of State (SOS) Bus	siness ID Number:	
	The Association's Se			

STATE OF NEVADA DEPARTMENT OF BUSINESS AND INDUSTRY REAL ESTATE DIVISION 3300 West Sahara Avenue, Suite 350, Las Vegas, NV 89102 (702) 486-4480 \* Toll free: (877) 829-9907 \* Fax: (702) 486-4520 E-mail: <u>CiCOmbudsman@real on you</u> http://www.red.nv.gov

#### STATEMENT OF FACT AGAINST A COMMUNITY MANAGER (#514a)

Statements 1 through 4 cited below must be met prior to filing this Statement of Fact. Please verify that you have met the requirements by initialing in each box. As the aggrieved party, you:

1.	Have sent the allegations of misconduct in writing to the <u>Community Manager</u> in an attempt to resolve the issue <b>before</b> filing a complaint with the Division and provided proof of the written communication in the form of an e-mail or letter. The written communication must include all allegations that you request the Division to consider for possible investigation.	<u> </u>
2.	Have waited at least 12 working days for the Community Manager to acknowledge and respond in writing to the alleged violation(s).	
3.	Have listed only one (1) alleged violation per page and have included applicable attachments (Exhibits) behind each such page. You must provide all supporting documentation with the complaint.	
4.	If you are a tenant, you must have had the complaint approved (written communication) by the unit's owner without the use of a Power of Attorney.	•

Please indicate whether you have spoken to a staff representative from the Ombudsman's Office to understand which specific provision of NRS or NAC 116 may have been violated. Yes No If yes, name:

#### Please Print or Type

Your Name:		
Your complete physical address:		
Unit Address, if different:		
Email Address:		
Home Phone:	Business Phone:	

Name of Community Manager the compla	int is against.
Name of Management Company:	
Address of Management Company:	
Management Company Telephone No.	
Name of the Association:	
Legal action pending pertaining to the alle	gations filed? Yes No If so, what action?
Alternative Dispute Resolution (ADR) clai	m filed? Yes No If so, what date & claim#:

### STATEMENT OF FACT FORMS 514 A&B

- Forms used when a complainant alleges that a Community Manager (CAM) violated their Standards of Practice, as outlined in NRS **116**A.**630**.
- OR the complainant alleges that the Reserve Study Specialist (RSS) violated their Standards of Practice, as outlined in NAC **116**A.**425**.
  - No statute of limitations.

#### **QUICK REVIEW**

#### Please answer the following question:

#### **Question 1**

Which of the following are true regarding the Intervention Affidavit?

a. It has a statute of limitations of **1** year.

b. It is used for disputes involving the interpretation of association governing documents.

c. It is filed against CAMs or RSSs.

d. It is used for complaints regarding NRS **116**.

#### **Question 2**

- Fill in the blank:
- A respondent is a \_\_\_\_\_\_

#### IMPORTANCE OF RECORDS IN THE COMPLAINT PROCESS



To file a formal complaint, having access to complete and accurate records is essential. Unit owners may need to request association records to support their claims effectively.



If a unit owner submits a written request to an association for access and/or copies of the books, records and other documents of the association pursuant to NRS 116.31175, the association must comply within 21 days.

### FAILURE TO PROVIDE RECORDS

#### NRS 116.31175



#### **FAILURE TO COMPLY**

### If the association fails to comply within 21 days:

- The Unit owner can complete the complaint form 530 and file with the Division.
- If the Division receives a properly completed complaint form, they will send a formal notice to the association requesting the specified records be supplied within 14 days.

#### SUMMARY

Action	Used for	Statute of Limitations
Alternative Dispute Resolution (ADR)	Disputes and violations of any association governing documents.	No statute of limitations.
Intervention Affidavit (IA)	Used for violation of NRS/NAC <b>116</b> .	<b>1</b> year from reasonable discovery of violation.
Statement of Facts	Used primarily against CAMs and RSS for violating Standards of Practice.	Reasonable time following reasonable discovery of violation.

# PATHWAYS OF COMPLAINTS: ALTERNATIVE DISPUTE RESOLUTION AND CIVIL ACTION



# Alternative Dispute Resolution (ADR)

[ol-'tər-nə-tiv di-'spyüt ,re-zə-'lü-shən]

Processes used to settle disputes outside of a courtroom.





#### SCOPE OF ADR

Remember, ADR is for parties with a dispute regarding the following (NRS 38.300):

- The procedures used for increasing, decreasing, or imposing additional assessments.
- The interpretation, application, or enforcement of:
  - CC&Rs
  - Any other governing documents applicable to the residential properties.

AL	(702) 486-4480 / Toll fee: (877) E-mail: <u>CICOmbudsman@re</u>	
Date:		ature of Claimant:
"Only one claimant per o	laim form is allowed for tracking	purposes.
Claimant:		
"If individual, provide full no	nme as it appears with the assessor's office in COMPLETE Association name as it appe	in order to verify that you are a Unit Owner. If an Association, provi ears on the <u>Secretary of State's website</u> .
Law Firm and Attorney (it		
Please	provide the name of the law firm and the n	ame of the attorney. An attorney is not required.
Mailing Address:		
	Street and number, cit	y, state, and zip code
Phone Number:	Fax Number:	Email Address:
*If individual, provide full i		E Association name as it appears on the <u>Secretary of State's websilt</u> dent Form 520B if there is more than one Respondent.
*If individual, provide full : Please list only one	party. Attach an Additional Respon-	dent Form 520B if there is more than one Respondent.
*If individual, provide full : Please list only one	party. Attach an Additional Respon-	dent Form 520B if there is more than one Respondent.
	party. Attach an Additional Respon	dent Form 520B if there is more than one Respondent.
*if individual, provide full Please list only one Mailing Address: Phone Number:	party. Attach an Additional Respon- Street and member, cit Fax Number.	dent Form 520B if there is more than one Respondent. y, state, and zip code Email Address:
*If mdividual, provide full i Please list only one Mailing Address: Phone Number: PLEASE SEI	party. Attach an Additional Response Street and number, cit Fax Number ECT YOUR METHOD OF RESOL	dent Form 520B if there is more than one Respondent, y, state, and zip code Email Address: LUTION: Mediation Referee Program <sup>®</sup>
*/f individual, provide fuil Please list only one Mailing Address: Phone Number: PLEASE SEI	party. Attach an Additional Response Street and manber, cit Fax Number: ECT YOUR METHOD OF RESOI Claims involving multiple parties may	dent Form 520B if there is more than one Respondent, y, state, and zip code Email Address: LUTION: Mediation Referee Program <sup>®</sup>
*/f individual, provide fuil i Please list only one Mailing Address: Phone Number: PLEASE SEI **If all parties agree	party. Attach an Additional Response Streat and number, cit Fax Number. ECT YOUR METHOD OF RESOI Claims involving multiple parties may to the Referee Program, the cost will	dent Form 520B if there is more than one Respondent, y, state, and tip code Email Address: LUTION: Mediation Referee Program* be excluded from the Referee Program.
*If individual, provide full i Please list only one Mailing Address: Phone Number: PLEASE SEI *"If all parties agre Yes No Has the all	party. Attach an Additional Response Street and number, etc Fax Number: ECT YOUR METHOD OF RESOU Clams involving multiple partiest may to the Referee Program, the cost will b sove-listed Claimant filed an Interve	dent Form 520B if there is more than one Respondent, y, state, and sip code Email Address: LUTION: Mediation Referee Program* be excluded from the Referee Program. be fully subsidized by the Division, if funds are available.
*If individual, provide full i Please list only one Mailing Address: Phone Number: PLEASE SEI *"If all parties agre Yes No Has the all	party. Attach an Additional Response Street and number, etc Fax Number: ECT YOUR METHOD OF RESOU Clams involving multiple partiest may to the Referee Program, the cost will b sove-listed Claimant filed an Interve	dent Form 520B if there is more than one Respondent.  ), state, and 2p code Email Address: UUTION: Mediation Refere Program* be resulted from the Refere Program* be fully subsidized by the Division. if finds are available. ention Affidavit (Form 530) regarding the same or similar

The claimant must completely fill out and acknowledge all applicable boxes on Form 520.

Claimant must provide one (1) original and two (2) copies of the Claim form 520 and supporting documents.

Page 2 of the form allows space for a brief statement outlining the dispute and to list the relevant provision(s) of the governing documents.

# ADR COMPLAINTS

### MEDIATOR VS. REFEREE: UNDERSTANDING THE DIFFERENCE IN CONFLICT RESOLUTION



#### **Mediator**

#### Mediators are certified and approved by the Division to promote agreement and compromise. Mediators may charge up to **\$167** per hour, not to exceed **\$500** for a **3**-hour mediation; each party pays half.

#### Referee

Referees are licensed attorneys approved by the Division to hear disputes and render a decision based on evidence provided. Applicants may receive an automatic subsidy once per year if they are in good standing.



The claimant can request either mediation or a referee.

- Reminder: Mediators are licensed and made available by the Division to promote agreement and compromise.
- Referees are licensed attorneys on the Division's panel to hear disputes based on evidence Division to hear disputes and render a decision based on evidence provided.
  - If both parties do not agree to go to a referee, the claim defaults to mediation.

The last page of Claim Form **520** contains a list of current mediators and referees to select from.

A **\$50** filing fee MUST be paid to NRED to begin the ADR process (NRS **38.320** (2)).

### MEDIATION OR REFEREE?

ш	n coment						
NV.gov	Department of Business and	Industry Nevada Real I	Estate Division Q	State /	<u>Agencies</u>	State Jobs	ADA Assistance
Home	Home • Online Services •	Administration - Pul	blications • Forms • Licensing • What's New? Sections • Contact Us •				
			Referees, Arbitrators and Mediators				
			The following are names and resumes of the Referees, Arbitrators and Mediators currently on the approved panel for the refere program, mediation and arbitration process.	e.			
			Additional names will be added periodically.				
			ADR MEDIATORS/REFEREES				
			Eric Dobberstein, Esq. (South) (North Virtual) Henry Melton (South) (North Virtual) Janet Trost, Esq. (South) (North Virtual) Malcolm Doctors (South) (North Virtual) Phillip A. Silvestri, Esq. (South) (North Virtual) Dee Newell, JD (South) (North Virtual) Paul H. Lamboley, Esq. (North)				
					G Select La	anguage 🔻	

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Version 3.1

### REFEREES, ARBITRATORS, AND MEDIATORS

https://red.nv.gov/Content/CIC/ADR/Panel/



Within 7-10 days after the claim is filed, the Division will mail the claimant:

- A copy of the processed ADR Claim Form **520**.
- > Overview Form **523**.
- Blank Respondent Answer Form 521.
- Application for Mediation Subsidy Form 668.
- Affidavit of Service Form showing the required documents that must be served to the respondent.

# **NOTIFYING THE RESPONDENT**

► This packet must be served, by the claimant or at the claimant's expense to the respondent within **45** days (NAC **38.350 (1))**.

- If there are multiple respondents:
  - Each respondent must be served separately.
  - A separate Affidavit of Service Form, completed by the server, must be notarized and filed with the Division for each respondent.

### REQUIREMENTS FOR RESPONDENTS

After hearing back from the Division, respondents MUST:

- 1. Review all documents served upon them.
- 2. Complete and file Form 521 within 30 days. One copy must be sent to the Division and the other to the claimant.
- 3. Provide a brief statement regarding the allegations.
- 4. Pay a \$50 filing fee to "NRED" either by check, money order, or cash at the time of filing. This fee is non-refundable.





STATE OF NEVADA	
DEPARTMENT OF BUSINESS AND INDUSTRY - REAL ESTATE DIVISIO	ON
OFFICE OF THE OMBUDSMAN FOR COMMON-INTEREST COMMUNITIES AND COND	OMINIUM HOTELS
3300 West Sahara Avenue, Suite 350 * Las Vegas, NV 89102	
(702) 486-4480 * Toll free: (877) 829-9907 * Fax: (702) 486-4520	
CICOmbudsman@red.nv.gov http://www.red.nv.gov	
A TERMATINE DISPUTE DESCI LITION (ADD) DESDONDE	NT FORM
ALTERNATIVE DISPUTE RESOLUTION (ADR) RESPONDE	NI FORM
Please review the ADR Overview, Form 523, prior to completing this f	orm.

**NOTE:** Referee and arbitration decisions are public records and will be published on the Division's website. Parties that participated in a referee hearing or arbitration resulting in a decision can request, in writing, to the Division to have their identifying information (name, address, phone number) redacted from the decision that is published.

Date:	Signature of Respondent or Attorney:
Claim Number	Located at the bottom of the Claim Form
Respondent:	
If individual	provide full name. If an Association, provide COMPLETE Association name as it appears on the Secretary of State's website.
Please I	ist only one party; attach Additional Claimant Form 520B if there is more than one Respondent
Law Firm and	Attorney (if applicable): Provide the name of the law firm and the name of the attorney. An attorney is not required.
	Provide the name of the law firm and the name of the attorney. An attorney is not required.
Contact Addre	Street and number, city, state, and zip code
	Street and number, city, state, and zip code
Contact Phone	: Fax Number: Email Address:
	PLEASE SELECT YOUR METHOD OF RESOLUTION: Mediation Referee Program* see: If Claimant has elected to participate in the Referee Program, you must also agree; otherwise the claim will be submitted to Mediation.
INITIAL	
	I have read and agree to the policies stated in the ADR Overview (Form #523).
	I mailed a copy of this Respondent Form and any supporting documents to the Claimant at the address on the Claim Form.
	Date packet was mailed:
	I agree to use the mediator/referee identified by the Claimant on page 4 of the Claim Form
	Mediator/Referee listed on Claim Form:

- The respondent will state on Form 521 whether they agree with the claimant's selection of mediator or referee.
- Both parties (no more than two) must agree to participate in the referee program, or the dispute will automatically default to mediation.
- If both parties cannot agree on a mediator/referee, one will be appointed by the Division at random.

### **FORM 521**



### **RESOLUTION: MEDIATED CASES**

- If mediation is successful, the parties sign a written agreement, which becomes enforceable.
- If mediation is unsuccessful, the parties may proceed to court with a letter from the Division.
  - OR both parties may agree to apply for binding or nonbinding arbitration.



- If either party is unhappy with the referee's decision, they have 60 days to request that the complaint be heard by a judge (NRS 38.325 (3)).
- If both parties are happy with the decision, it is nonbinding until confirmed in court (within 1 year).

# RESOLUTION: REFEREED CASES

# Mediation

- If unhappy with mediation, may proceed to binding or non-binding arbitration.
- Or may proceed to civil court.

# Referee

- Unilaterally renders a decision.
  - 60 days to have the complaint heard by a judge.



### SUBSIDY

- The Division may subsidize proceedings for mediation (NAC 116.520).
- If there are available funds in the account.
- Both parties are advised to submit the Subsidy
   Application (form 668) at the time of filing Claim form 520 or Response form 521 with the Division.
  - Note: Mediation may be subsidized up to \$250 per party; \$500 per mediation.


### SUBSIDY, continued

- A. To receive a subsidy:
  - Unit owners may apply only once during each fiscal year of the State (July 1 to June 30) for each unit owned.
  - Associations must be in good standing with the Secretary of State and the Office of the Ombudsman.

- ADR process is not required, and parties may proceed directly to court for (NRS 38.300 (3)):
  - Claims for injunctive relief (court ordering specific action) where there is an immediate threat of irreparable harm; and
  - > Actions relating to the title of a residential property.



# EXCEPTIONS TO THE ADR REQUIREMENT

Disclaimer: If a civil action is filed between a homeowner and an association concerning governing documents or an assessment dispute before the ADR process has been completed, the court MAY dismiss that case without taking any action, in accordance with NRS 38.300.

# CIVIL ACTION

### **NRS** 116.4117

NRS 116.4117 Effect of violations on rights of action; civil action for damages for failure or refusal to comply with provisions of chapter or governing documents; members of executive board not personally liable to victims of crimes; circumstances under which punitive damages may be awarded; attorney's fees.

1. Subject to the requirements set forth in subsection 2, if a declarant, community manager or any other person subject to this chapter fails to comply with any of its provisions or any provision of the declaration or bylaws, any person or class of persons suffering actual damages from the failure to comply may bring a civil action for damages or other appropriate relief.

2. Subject to the requirements set forth in NRS 38.310 and except as otherwise provided in NRS 116.3111, a civil action for damages or other appropriate relief for a failure or refusal to comply with any provision of this chapter or the governing documents of an association may be brought:

- (a) By the association against:
  - (1) A declarant;
    - (2) A community manager; or
  - (3) A unit's owner.
- (b) By a unit's owner against:
- (1) The association;
- (2) A declarant; or
  - (3) Another unit's owner of the association.

(c) By a class of units' owners constituting at least 10 percent of the total number of voting members of the association against a community manager.

### **NRS** 38.300 (3)

3. "Civil action" includes an action for money damages or equitable relief. The term does not include an action in equity for injunctive relief in which there is an immediate threat of irreparable harm, or an action relating to the title to residential property.



### WHY DO YOU THINK THAT ADR IS REQUIRED BEFORE PROCEEDING TO COURT?

### SUMMARY

Action	Used for	Statute of Limitations
Alternative Dispute Resolution (ADR)	Dispute and violation of any association governing documents	No statute of limitations
Intervention Affidavit (IA)	Used for violation of NRS/NAC <b>116</b>	1 year from reasonable discovery of violation
Statement of Facts	Used primarily against CAMs and RSS for violating Standards of Practice	Reasonable time following reasonable discovery of violation

Before we move on to the Q&A session, I'd like to remind everyone that we are here to provide general information and guidance. We cannot give legal advice, interpret the law, or provide opinions on individual circumstances.

The purpose of this Q&A session is to help clarify the material covered in today's class. Please keep your questions focused on understanding and the application of the statutes, regulations, and CC&Rs relevant to your roles within your community. For specific legal concerns or individual issues, please consult with a qualified attorney.



# **THANK YOU**



Andrei Tcacenco & Dre Anderson Email: cicombudsman@red.nv.gov Phone number: 702-486-4480

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# PATHWAYS OF A COMPLAINT: INTERVENTION AFFIDAVIT AND STATEMENT OF FACTS



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OUR GOAL IS TO IS TO HELP YOU LEARN, UNDERSTAND, AND APPLY THE RELEVANT STATUTES, REGULATIONS, AND YOUR COMMUNITY'S CC&RS. WE WANT TO EQUIP YOU WITH THE KNOWLEDGE AND TOOLS NECESSARY TO EFFECTIVELY MANAGE AND LIVE WITHIN YOUR COMMON-INTEREST COMMUNITIES.

WE WILL HAVE DEDICATED TIME FOR QUESTIONS AND ANSWERS TOWARDS THE END OF THE CLASS. PLEASE NOTE THAT THE Q&A SESSION IS INTENDED TO CLARIFY THE MATERIAL COVERED TODAY AND NOT TO ADDRESS SPECIFIC ISSUES YOU MIGHT BE FACING. FEEL FREE TO JOT DOWN ANY QUESTIONS REGARDING THE CLASS THAT YOU MAY HAVE AS WE GO ALONG, AND WE WILL ADDRESS THEM DURING THE Q&A PERIOD.

### FOR ONLINE LIVE CLASSES: PLEASE ENSURE YOUR WEBEX DISPLAY NAME IS THE NAME YOU WANT YOUR CERTIFICATE OF ATTENDANCE TO BE ISSUED IN.

### **LEARNING OBJECTIVES**

### • By the conclusion of this class, students will:

- Understand the purpose of the Intervention Affidavit.
- Understand how the intervention process works in the Real Estate Division.
- Understand how to use the Statement of Facts form.



- Prior to submitting a complaint to the Division, a complainant must send a notice by certified mail, with return receipt requested, to the respondent. (NRS 116.760).
- Allow 10 business days for the respondent to address the alleged violation.

## INTERVENTION AFFIDAVIT PREPARATORY STEPS

### WHY IS CERTIFIED RETURN RECEIPT REQUESTED NOTICE REQUIRED?

What is the reasoning behind this requirement?





### PRIOR TO FILING:

- The complainant must mail a written notice to the respondent and give the respondent at least ten (10) business days to correct the alleged violation.
- The complainant must have attempted to resolve the alleged violation with the respondent.



The notice must describe the violation, actual damages incurred, and any proposed corrective action (NRS 116.760).

STATE OF NEVADA DEPARTMENT OF BUSINESS AND INDUSTRY REAL ESTATE DIVISION 3300 West Sahara Avenue, Suite 325, Las Vegas, NV 89102 (702) 486-4480 / Toll free: (877) 829-9907 / Fax: (702) 486-4520 <u>CICOmbudsman@red.nv.gov / https://red.nv.gov</u>

#### Intervention Affidavit (Form 530)

The statements immediately below must be met before filing this Affidavit. Please verify that you have met each requirement by <u>INITIALING</u> each box. As the aggrieved party, you are attesting you:

 Understand that this Affidavit cannot be filed more than 1 year after you discovered or reasonably should have discovered the alleged violation (if more than 1 year, you cannot file this Affidavit).

Date alleged violation took place:

- Have mailed to the Respondent's last known address, allowing at least 10 business days, a certified return receipt requested notice, specifying in reasonable detail:
  - (a) all alleged violations, which are identical to the allegations listed on the Affidavit .....
  - (b) any actual damages suffered; and .....
  - (c) any corrective actions proposed .....
- Have provided with this Affidavit a copy of the notice with the certified return receipt from the post office stapled to it.

### WHAT IS THE PURPOSE OF IA FORM 530?

- Complaints regarding NRS, NAC, 116, such as:
  - ► The election process.
  - Meeting notifications.
  - Records Access.
  - Amending the CC&Rs.
  - Financial Reporting.
  - ► Fining Process.
    - (Refer to NRS 116.760).

### AGAINST WHOM MAY COMPLAINTS BE FILED?

- Complaints may be filed against any person within the jurisdiction of NRS 116, except Community Managers (CAMs) and Reserve Study Specialists (RSS) (NRS 116.750 & 760). This includes:
  - Association officers, employees, or agents.
  - Board members.
  - Unit Owners.



STATE OF NEVADA DEPARTMENT OF BUSINESS AND INDUSTRY REAL ESTATE DIVISION 3300 West Sahara Avenue, Suite 325, Las Vegas, NV 89102 (702) 486-4480 / Toll free: (877) 829-9907 / Fax: (702) 486-4520 <u>CICOmbudsman/üred nv.gov</u> / https://red.nv.gov
Intervention Affidavit (Form 530)
The statements immediately below must be met before filing this Affidavit. Please verify that you have met each requirement by <u>INITIALING</u> each box. As the aggneved party, you are attesting you: INITIALS
<ol> <li>Understand that this Affidavit cannot be filed more than 1 year after you discovered or reasonably should have discovered the alleged violation (if more than 1 year, you cannot file this Affidavit).</li> </ol>
Date alleged violation took place:
<ol> <li>Have mailed to the Respondent's last known address, allowing at least 10 business days, a certified return receipt requested notice, specifying in reasonable detail:</li> </ol>
(a) all alleged violations, which are identical to the allegations listed on the Affidavit
(b) any actual damages suffered; and
(c) any corrective actions proposed
<ol> <li>Have provided with this Affidavit a copy of the notice with the certified return receipt from the post office stapled to it.</li> </ol>
<ol> <li>Have included on this form all allegations listed in the certified notice and understand that any allegation not identically listed on both the notice and Affidavit will not be addressed by the Division.</li> </ol>
5. Have in lieu of a notice, sent certified with return receipt requested, the Intervention Affidavit. 🗌 Yes 🗌 No
If yes, the certified receipt has been stapled to the Affidavit. Identify exhibits sent:
6. Before filing this Affidavit, have provided the Respondent with at least 10 business days to address/correct the alleged violation(s) of NRS/ NAC 116 and/or the governing documents, and all other reasonable efforts to resolve allegation(s) have failed.
<ol> <li>Have listed only one alleged violation on page 2 and included the applicable labeled attachments (Exhibits) behind each alleged violation (use a separate page 2 for each alleged violation).</li> </ol>
8. I understand once the Affidavit is submitted, the Division cannot provide me with a copy of my submittal
Have spoken with Ombudsman staff before filing the Affidavit. 🗌 Yes 🗌 No 🛛 If yes, name:
Have filed an ADR claim or litigation involving the same allegation(s). 🗌 Yes 🗌 No If yes, case number:
STATE OF NEVADA COUNTY OF DATE:
I, (Complainant), after being first duly sworn, state under penalty of perjury and based upon personal knowledge have been aggrieved by an alleged violation of Chapter 116 of the Nevada Revised Statutes, Nevada Administrative Code, or the governing documents of the Association.
1. The person or entity who committed the alleged violation and who was sent the required certified letter or certified Affidavit is (if
multiple, list each Respondent):
2. The Respondent(s) role in the community:
3. The name of the Association where the alleged violation took place:
4. The Association's Secretary of State (SOS) Business ID Number:
SOS Look-up: https://ezos.nv.gov/EntitySearch/OnlineEntitySearch
Revised 9/1/2021 Page 1 of 2 Form 530

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STATE OF NEVADA DEPARTMENT OF BUSINESS AND INDUSTRY REAL ESTATE DIVISION 3300 West Sahara Avenue, Suite 325, Las Vegas, NV 89102 (702) 486-4480 / Toll free: (877) 829-9907 / Fax: (702) 486-4520 CICOmbudsman@red.nv.gov / https://red.nv.gov

- You are required to provide a brief description, per allegation, per page (reprint this page for each separate alleged violation). Only the first allegation is required to be notarized.

- Violation). Only me first allegation is required to be notarized.
   Each allegation must have its own supporting documentation (Example: Exhibit #1 for allegation #1), which must be placed directly behind the allegation. Do not submit any documents printed double-sided.
   If you provide video or audio via a USB drive or another electronic format, you MUST indicate the time stamp, which identifies the allegated violation, and where NRED should start viewing.
   Do not write "See Attached." If additional space is needed, please use a separate sheet. If "See Attached" is written in any section below, your complaint will not be processed and is incomplete.

Pursuant to Nevada Revised Statutes 116.760 (4) The Commission or a hearing panel may impose an administrative fine of not more than \$1,000 against any person who knowingly files a false or fraudulent Affidavit with the Division.

ALLECED VIOLATION: Allegation # Briefly describe the allegation that occurred. NRED must be able to understand what allegedly happened. Do not list/cite statutes, regulations, or governing documents sections in this space.

RECOMMENDED CORRECTIVE ACTION (Within the board's or NRED's authority):

#### SUPPORTING LAW AND/OR GOVERNING DOCUMENTS:

	foregoing Affidavit co ist of my knowledge a		es (including all additional	attached pages), and it i	is true and
Complainant Nat	me:		State of Nevada	County of	
Complainant Sig	nature:		Subscribed and swo	ern before me on	by
Street Address: City:	State:	Zip Code:	(Name(s) of person	(s) making statement)	
Phone:	Email:		(Notary Stamp)	Signature of No	otarial Officer
NRI 33 Email	nd-deliver the completed ED, OFFICE OF THE O 800 W. SAHARA AVE., LAS VEGAS, NEVAD and fax submissions will this packet for yourself from NRED cannot be	MBUDSMAN SUITE 325, A 89102 not be accepted. before submission as copi	ies		
Revised 9/1/20	21	Pa	age 2 of 2		Form 530



## When completing Form 530, keep the following in mind:

- ▶ Form 530 is a 2-page form.
- Allegations are detailed on page 2.
- Only one allegation per page 2.
- ▶ The Form 530 must be notarized.
- If multiple page 2 copies are submitted, only one (1) needs to be notarized.

# COMPLETING THE IA 530 FORM

### COMPLETING THE FORM, CONTINUED

#### A quick reminder that:

- All supporting documentation must be attached and labeled following each allegation. Examples include:
  - Meeting minutes.
  - Budgets.
  - Violation notices.

### DO NOT WRITE "SEE ATTACHED".

### SUBMITTING THE FORM

Forms can be submitted either by mail or in person to:

NV Real Estate Division, Office of the Ombudsman, CICCH Program, 3300 W. Sahara Ave., Suite 325, Las Vegas, NV 89102



STATE OF NEVADA DEPARTMENT OF BUSINESS AND INDUSTRY REAL ESTATE DIVISION 3300 West Sahara Avenue, Suite 325, Las Vegas, NV 89102 (702) 486-4480 / Toll free: (877) 829-9907 / Fax: (702) 486-4520 <u>CICOmbudsman@red.nv.gov</u> / https://red.nv.gov

#### **Intervention Affidavit (Form 530)**

The statements immediately below must be met before filing this Affidavit. Please verify that you have met each requirement by <u>INITIALING</u> each box. As the aggrieved party, you are attesting you:

1. Understand that this Affidavit cannot be filed more than 1 year after you discovered or reasonably should have discovered the alleged violation (**if more than 1 year, you cannot file this Affidavit**).....

Date alleged violation took place:

- Have mailed to the Respondent's last known address, allowing at least 10 business days, a certified return receipt requested notice, specifying in reasonable detail:
  - (a) all alleged violations, which are identical to the allegations listed on the Affidavit .....
  - (b) any actual damages suffered; and .....
  - (c) any corrective actions proposed .....
- Have provided with this Affidavit a copy of the notice with the certified return receipt from the post office stapled to it.

### INTERVENTION AFFIDAVIT

 A person who alleges that they have been harmed by a violation must file a written affidavit with the Division within 1 year after reasonable discovery of the alleged violation. The complaint should make any allegations, any damages suffered and proposed corrective action. (NRS 116.760).



# Complaints



- The affidavit must be on a prescribed form and include evidence that the respondent was given proper notice.
- The respondent must also be given a reasonable opportunity to address or correct the violation after receiving the notice.
- You must provide proof that previous efforts to resolve the dispute were unsuccessful (NRS 116.760 (3)(B)).

STATE OF NEVADA DEPARTMENT OF BUSINESS AND INDUSTRY REAL ESTATE DIVISION 3300 West Sahara Avenue, Suite 325, Las Vegas, NV 89102 (702) 486-4480 / Toll free: (877) 829-9907 / Fax: (702) 486-4520 <u>CICOmbudsman@red.nv.gov</u> / <u>https://red.nv.gov</u>

#### **Intervention Affidavit (Form 530)**

The statements immediately below must be met before filing this Affidavit. Please verify that you have met each requirement by <u>INITIALING</u> each box. As the aggrieved party, you are attesting you:

1. Understand that this Affidavit cannot be filed more than 1 year after you discovered or reasonably should have discovered the alleged violation (if more than 1 year, you cannot file this Affidavit).

Date alleged violation took place:

- 2. Have mailed to the Respondent's last known address, allowing at least 10 business days, a certified return receipt requested notice, specifying in reasonable detail:
  - (a) all alleged violations, which are identical to the allegations listed on the Affidavit .....
  - (b) any actual damages suffered; and .....
  - (c) any corrective actions proposed .....
- Have provided with this Affidavit a copy of the notice with the certified return receipt from the post office stapled to it.

#### ACTIVITY: FORM 530 (INTERVENTION AFFIDAVIT)

Analyze the completed affidavit shown on the next slide.

#### STATE OF NEVADA DEPARTMENT OF BUSINESS AND INDUSTRY REAL ESTATE DIVISION 3300 West Sahara Avenue, Suite 325, Las Vegas, NV 89102 (702) 486-4480 / Toll free: (87) 829-9907 / Fax: (702) 486-4520 <u>CICOmbudsman@red.nv.gov / https://red.nv.gov</u>

Intervention Affidavit (Form 530)

	e statements immediately below must be met before filing this Affidavit. <b>Please verify that you have met each</b> <b>uirement by <u>INITIALING</u> each box.</b> As the aggrieved party, you are attesting you:	INITIALS
1.	Understand that this Affidavit cannot be filed more than 1 year after you discovered or reasonably should have	JD
	discovered the alleged violation (if more than 1 year, you cannot file this Affidavit).	515
	Date alleged violation took place: 01/01/2024	
2.	Have mailed to the Respondent's last known address, allowing at least 10 business days, a certified return receipt requested notice, specifying in reasonable detail:	
	(a) all alleged violations, which are identical to the allegations listed on the Affidavit	JD
	(b) any actual damages suffered; and	JD
	(c) any corrective actions proposed	JD
3.	Have provided with this Affidavit a copy of the notice with the certified return receipt from the post office stapled to it.	JD
4.	Have included on this form all allegations listed in the certified notice and understand that any allegation not identically listed on both the notice and Affidavit will not be addressed by the Division.	JD
5.	Have in lieu of a notice, sent certified with return receipt requested, the Intervention Affidavit. 🗌 Yes 🔳 No	JD
	If yes, the certified receipt has been stapled to the Affidavit. Identify exhibits sent:	
6.	Before filing this Affidavit, have provided the Respondent with at least 10 business days to address/correct the alleged violation(s) of NRS/ NAC 116 and/or the governing documents, and all other reasonable efforts to resolve allegation(s) have failed.	JD
7.	Have listed only one alleged violation on page 2 and included the applicable labeled attachments (Exhibits) behind each alleged violation (use a separate page 2 for each alleged violation).	JD
8.	I understand once the Affidavit is submitted, the Division cannot provide me with a copy of my submittal	JD
Ha	ve spoken with Ombudsman staff before filing the Affidavit. 🔳 Yes 🗌 No 🛛 If yes, name: Sonya Meriwea	ther
Ha	ve filed an ADR claim or litigation involving the same allegation(s). 🗌 Yes 🔳 No If yes, case number:	
ST	ATE OF NEVADA COUNTY OF Washoe DATE: 06/01/2024	
bas	ohn Doe (Complainant), after being first duly sworn, state under penalty of p ed upon personal knowledge have been aggrieved by an alleged violation of Chapter 116 of the Nevada Revised Statu ministrative Code, or the governing documents of the Association.	erjury and tes, Nevada
1.	The person or entity who committed the alleged violation and who was sent the required certified letter or certified A	ffidavit is (if
	multiple, list each Respondent): Nevada Sage HOA Board of Directors	
2.	The Respondent(s) role in the community: HOA Board of Directors	
3.	The name of the Association where the alleged violation took place: Nevada Sage HOA, Elko, NV	
4.	The Association's Secretary of State (SOS) Business ID Number: C35600-2006	
	SOS Look-up: https://esos.nv.gov/EntitySearch/OnlineEntitySearch	

#### STATE OF NEVADA DEPARTMENT OF BUSINESS AND INDUSTRY REAL ESTATE DIVISION 3300 West Sahara Avenue, Suite 325, Las Vegas, NV 89102 (702) 486-4480 / Toll free: (877) 829-9907 / Fax: (702) 486-4520 CICOmbudsman@red.nv.gov / https://red.nv.gov

- 1. You are required to provide a brief description, per allegation, per page (reprint this page for each separate alleged violation). Only the first allegation is required to be notarized.
- 2. Each allegation must have its own supporting documentation (Example: Exhibit #1 for allegation #1), which must be placed directly behind the allegation. Do not submit any documents printed double-sided.
- 3 If you provide video or audio via a USB drive or another electronic format, you MUST indicate the time stamp, which identifies the alleged violation, and where NRED should start viewing.
- 4. Do not write "See Attached." If additional space is needed, please use a separate sheet. If "See Attached" is written in any section below, your complaint will not be processed and is incomplete.

Pursuant to Nevada Revised Statutes 116.760 (4) The Commission or a hearing panel may impose an administrative fine of not more than \$1,000 against any person who knowingly files a false or fraudulent Affidavit with the Division.

ALLEGED VIOLATION: Allegation # \_\_\_\_ Briefly describe the allegation that occurred. NRED must be able to understand what allegedly happened. Do not list/cite statutes, regulations, or governing documents sections in this space.

Upon written request our Nevada Sage HOA Board of Directors refused to make available the books, records, and other papers of our Association for review. (Reference attached the Initial Request made on June 1, 2023). Once again, our HOA Board of Directors has refused to respond to our certified receipt letter written request for review of these documents made on September 1, 2023. (Reference attached with Certified Receipt for Documentation).

#### RECOMMENDED CORRECTIVE ACTION (Within the board's or NRED's authority):

Make available the books, records, and other requested papers of our Association for review by the Compliance section of the State of Nevada HOA Ombudsman Real Estate Devision. This review should focus on a fair and equitable reserve funding plan for both new (occupancy in 2020) and old

Page 2 of 2

(occupancy in 2004) condominium building unit owners to make up for a 20 year condominium building common elements significant reserve funds shortfall.

#### SUPPORTING LAW AND/OR GOVERNING DOCUMENTS:

NRS 116.760		
I have read the foregoing Affidavit consisting of <u>10</u> correct to the best of my knowledge and belief.	pages (including all additional attached pag	es), and it is true and
Complainant Name: John Doe	State of Nevada County of	Washoe

Complainant Signature:
Street Address: 1111 South Virgina St

Zip Code: 89502 State: NV City: Reno

3300 W. SAHARA AVE., SUITE 325, LAS VEGAS, NEVADA 89102 Email and fax submissions will not be accepted. Retain a copy of this packet for yourself before submission as copies from NRED cannot be provided.

Phone: (775) 775-1111 Email:

Revised 9/1/2021

(Name(s) of person(s)	making statement)
(Notary Stamp)	Signature of Notarial Officer

Subscribed and sworn before me on

Mail or hand-deliver the completed Affidavit package to:
NRED, OFFICE OF THE OMBUDSMAN
3300 W SAHADA AVE SUITE 325

by

Form 530

#### STATE OF NEVADA DEPARTMENT OF BUSINESS AND INDUSTRY REAL ESTATE DIVISION 3300 West Sahara Avenue, Suite 325, Las Vegas, NV 89102 (702) 486-4480 / Toll free: (877) 829-9907 / Fax: (702) 486-4520 CICOmbudsmanñerd.nv.gov/ https://red.nv.gov

- You are required to provide a brief description, per allegation, per page (reprint this page for each separate alleged violation). Only the first allegation is required to be notarized.
- Each allegation must have its own supporting documentation (Example: Exhibit #1 for allegation #1), which must be
  placed directly behind the allegation. Do not submit any documents printed double-sided.
- If you provide video or audio via a USB drive or another electronic format, you MUST indicate the time stamp, which identifies the alleged violation, and where NRED should start viewing.
- 4. Do not write "See Attached." If additional space is needed, please use a separate sheet. If "See Attached" is written in any section below, your complaint will not be processed and is incomplete.

#### Pursuant to Nevada Revised Statutes 116.760 (4) The Commission or a hearing panel may impose an administrative fine of not more than \$1,000 against any person who knowingly files a false or fraudulent Affidavit with the Division.

ALLEGED VIOLATION: Allegation # 1 Briefly describe the allegation that occurred. NRED must be able to understand what allegedly happened. Do not list/cite statutes, regulations, or governing documents sections in this space.

Upon written request our Nevada Sage HOA Board of Directors refused to make available the books, records, and other papers of our Association for review. (Reference attached the Initial Request made on June 1, 2023). Once again, our HOA Board of Directors has refused to respond to our certified receipt letter written request for review of these documents made on September 1, 2023. (Reference attached with Certified Receipt for Documentation).

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(occupancy in 2004) condominium building unit owners to make up for a 20 year condominium building common elements significant reserve funds shortfall.

#### SUPPORTING LAW AND/OR GOVERNING DOCUMENTS:

NRS 116.31175			
	ng Affidavit consisting of 10 y knowledge and belief.	pages (including all additional attached pages), and it is true and	
Complainant Name: Joh	n Doe	State of Nevada County of Washoe	
Complainant Signature:		Subscribed and sworn before me on by	Y
Street Address: 1111 Sor	uth Virgina St		
City: Reno	State: NV Zip Code: 89	(Name(s) of person(s) making statement)	
Phone: (775) 775-1111	Email:	(Notary Stamp) Signature of Notarial Offic	er
NRED, OFF 3300 W. S LAS V Email and fax Retain a copy of this pac	er the completed Affidavit package to FICE OF THE OMBUDSMAN SAHARA AVE, SUITE 325, 'EGAS, NEVADA 89102 submissions will not be accepted. ket for yourself before submission a RED cannot be provided.		
Revised 9/1/2021		Page 2 of 2 For	m 530

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### **GROUP ACTIVITY**

### In the chat, discuss the following questions:

- What allegation has the claimant made against the Board, according to the Intervention Affidavit?
- Which NRS statute is correct, NRS 116.760 or NRS 116.31175?


### GROUP DISCUSSION

 Did this respective complainant follow all the first steps, as outlined in the presentation? Written complaint to the Board of the Association. Written certified notice of violation sent within 1 year of discovery of alleged violation.

Intervention Affidavit.

# FIRST STEPS CHECKLIST

#### Did you?

- Read your association's governing documents and follow the required conflict resolution procedures?
- Make reasonable efforts to resolve this issue directly with the respondent?
- Send your certified complaint to the respondent, in writing, return receipt requested?
- Give the respondent at least 10 business days to respond to my complaint?





### **INITIAL REVIEW**

Complaint received by Ombudsman's Office.

Complainant receives a confirmation from the Division upon submission of the packet (if the complaint is sent by mail).

Once under review, a request may be sent to the respondent by the Division for information and documentation. Once all requested information is received, a recommendation is made to the Ombudsman regarding the outcome.

- > A conference request.
- **ADR** option.
- **Referral of the complaint to the Compliance Chief.**
- **Closure of the complaint.**



# POSSIBLE COURSES OF ACTION





- If a conference is conducted and successful, parties sign a non-binding agreement that they are expected to adhere to.
- If it is unsuccessful, parties:
  - > Will be informed of the ADR process.

# **RESOLUTION PATHWAY 2: CONFERENCE**



## **PATHWAY 3:ADR OPTION**



### **PATHWAY 4: COMPLIANCE REFERRAL**



### **IN YOUR OWN WORDS**

What are the possible outcomes after an Intervention Affidavit (Form 530) is filed? Please provide a summary.

### **THE COMMISSION PROCESS (NRS 116.770)**

The Deputy Attorney General (DAG) hears the Division's case.

DAG escalates the complaint to the Commission. The respondent must file an answer no later than 30 days after the date of notice.

The respondent must admit or deny the allegations.



### RULING

If the Commission finds grounds for disciplinary action against an association based on NRS 116.785, they may:

- Issue an order directing the respondent to cease and desist.
- Issue an order directing the respondent to take action to correct the issue.
- Impose an administrative fine of up to \$1,000 for each violation.
- And/or order the respondent to pay the cost of the hearing.

## If the Commission finds grounds for disciplinary action against the association's governing board, they may (NRS 116.785):

- > Order an audit of the association.
- Order board members removed from their office/position.
- > Require the association to hire a licensed CAM.
- > And/or appoint a receiver (defined in NRS 32.175) if:
  - The board has been guilty of fraud/collusion/gross mismanagement.
  - **Guilty of misfeasance/malfeasance/nonfeasance.**
  - The assets of the association are in danger of waste through attachment, foreclose, litigation, or otherwise.



# RULING, CONTINUED

### **STATEMENT OF FACT (FORMS 514(A)&(B)**

# Statement of Fact (SOF) Forms are used when a complainant alleges that:

- A Community Manager (CAM) violated their Standards of Practice outlined in NRS 116A.630; or
- A Reserve Study Specialist (RSS) violated their Standards of Practice outlined in NAC 116A.425.



 STATE OF NEVADA

 DEPARTMENT OF BUSINESS AND IDUSTRY

 REAL ESTATE DIVISION

 3300 West Sahara Aveme, Suite 350, Lav Vegas, NV 89102

 (702) 486-4480 \* Toll free; (877) 829-9907 \* Fax; (702) 486-4500

 E-mail: ClCombudsman@red nv.gov

 http://www.red.nv.gov

#### STATEMENT OF FACT AGAINST A COMMUNITY MANAGER (#514a)

Statements 1 through 4 cited below must be met prior to filing this Statement of Fact. Please verify that you have met the requirements by initialing in each box. As the aggrieved party, you:

1.	Have sent the allegations of misconduct in writing to the <u>Community Manager</u> in an attempt to resolve the issue before filing a complaint with the Division and provided proof of the written communication in the form of an e-mail or letter. The written communication must include all allegations that you request the Division to consider for possible investigation.

2. Have waited at least 12 working days for the Community Manager to acknowledge and respond in writing to the alleged violation(s).

 Have listed only one (1) alleged violation per page and have included applicable attachments (Exhibits) behind each such page. You must provide all supporting documentation with the complaint.

 If you are a tenant, you must have had the complaint approved (written communication) by the unit's owner without the use of a Power of Attorney.

Please indicate whether you have spoken to a staff representative from the Ombudsman's Office to understand which specific provision of NRS or NAC 116 may have been violated.  $\Box$  Yes  $\Box$  No If yes, name:

#### Please Print or Type

Your complete physical address	8	
Unit Address, if different:		
Email Address:		
Home Phone:	Business Phone:	

Name of Community Manager the complaint is against:	
Name of Management Company:	
Address of Management Company:	
Management Company Telephone No.	
Name of the Association:	
Legal action pending pertaining to the allegations filed? Yes No If so, what action?	
Alternative Dispute Resolution (ADR) claim filed? Yes No If so, what date & claim#:	

# **FORM 514A**

#### Used when a CAM:

 Is not complying with their standards of practice, per NRS 116A.630.

STATE OF NEVADA DEPARTMENT OF BUSINESS AND INDUSTRY REAL ESTATE DIVISION 3300 W. Sahara Ave., Suite 325 \* Las Vegas, Nevada 89102 (702) 486-4480 \* Toll free: (877) 829-9907 \* Fax: (702) 486-4520 E-mail: CICOmbudsman@red.nv.gov http://red.nv.gov

COMPLAINT AGAINST A RESERVE STUDY SPECIALIST

Please Print or Type Your Name:			
Home Phone: Address:	Email:		
(Street)	(City)	(State)	(Zip)

Please complete the following information concerning your complaint. The Division's ability to investigate the matter will depend largely upon you providing a complete and detailed sworn statement. <u>ATTACH ALL PERTINENT</u> COPIES OF PAPERS AND/OR DOCUMENTS TO THIS FORM. KEEP ORIGINALS FOR YOUR FILE.

Name of Reserve Study Specialist complaint is against:		
Name of Reserve Study Company:		
Address of Reserve Study Company:		
Telephone No. of Reserve Study Company		
Is any legal action pending? Yes□ No□ If so, what action?		
Has an Alternative Dispute Resolution (ADR) claim been filed? Yes	es No If so, what date:	

#### CONSIDER THE FOLLOWING CAREFULLY

- · The Division is not empowered to compel anyone to accede to demands of any kind. We cannot compel refunds of any kind. In this regard, we suggest that you seek private counsel to protect your interests, as we are not authorized to give legal advice.
- · Do not delay any civil action you might be considering regarding this matter.
- Should the Division determine that a case warrants opening against the Reserve Study Specialist, an
  investigation will be initiated. Considerable time may be required to complete our investigation. It may be necessary for you to appear and testify should this matter proceed to a hearing before the Commission for Common-Interest Communities

- To start the process, you must: 1. Provide to the Division proof of written communication with the Reserve Study Specialist. The written communication must include all allegations that you request the Division to consider for possible
- investigation. The written communication may be in the form of an e-mail, facsimile or letter.
- Allow the Reserve Study Specialist a minimum of twelve (12) business days to respond before filing a complaint with the Division
- 4. Provide copies of all documentation that supports the allegation(s) against the Reserve Study Specialist

I declare under penalty of perjury under law of the State of Nevada that the foregoing attached statement consisting \_\_\_\_ pages is true and correct. of

# **FORM 514B**

#### Used when an RSS (NAC 116A.425):

- Fails to perform a reserve study within their professional competence.
- Fails to exercise due care and careful planning in the performance of a reserve study.
- Fails to provide mandatory disclosures.
- Fails to stay informed of new industry developments.
- Knowingly makes inaccurate or misleading representations or statements to the association.
- **Misrepresents facts for personal benefit.**
- Has had their certificate revoked in another state.



#### Complainant must verify that:

- The allegations of misconduct were sent, in writing, to the CAM or RSS to resolve the issue before filing a complaint with the Division.
- Complainant must wait at least 12 business days for the CAM or RSS to acknowledge and respond in writing to the alleged violation(s).
- They have listed only one (1) alleged violation per page and have included applicable attachments (exhibits) behind each such page.

Note: If the complainant is a tenant, they must have the complaint authorized, in writing, by the unit's owner, indicating that a complaint may be filed on their behalf, without the use of a power of attorney.

# **COMPLETING THE FORM**

- If a complaint has merit (NRS 116A.400 & 420):
  - A letter may be sent advising the CAM or RSS to correct the allegations.
  - > The Administrator may impose an administrative fine.
  - The case may be referred to the Commission for further discipline.



# **OUTCOMES**



- If the Commission finds grounds for action against a CAM or RSS, they may:
  - Revoke or suspend the respondent's certificate for at least 1 year;
  - Impose a fine of up to \$5,000 for each violation;
  - Refuse to renew or reinstate a certificate;
  - Place the Community Manager on probation or require them to complete their education;
  - Require the manager or specialist to pay restitution;
  - Require the manager or specialist to cover the cost of the hearing.

# COMMON-INTEREST COMMUNITY COMMISSION



# FINAL DECISIONS

- The Commission shall render a final decision on the merits of the complaint not later than 20 days after the date of the final hearing.
- The Commission shall notify all parties to the complaint of its decision, in writing, by certified mail, not later than 60 days after the date of the final hearing.

NRS 116.780

### **KNOWLEDGE CHECK**

Which one of the following is true regarding form 514A?

- a.) The complaint has a statute of limitations of one year.
- b.) It is generally filed against the executive board.
- c.) It can only be submitted by unit owners.
- d.) It can only be filed against CAMs.



Before we move on to the Q&A session, I'd like to remind everyone that we are here to provide general information and guidance. We cannot give legal advice, interpret the law, or provide opinions on individual circumstances.

The purpose of this Q&A session is to help clarify the material covered in today's class. Please keep your questions focused on understanding and the application of the statutes, regulations, and CC&Rs relevant to your roles within your community.

For specific legal concerns or individual issues, please consult with a qualified attorney.



# THANK YOU



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