

URGENT: A BREACH OF TRUST AND A DEMAND FOR ACCOUNTABILITY

Dear Fellow Homeowner,

We are reaching out because **our community has been placed at risk**. For over a year, our safety has been ignored. After uncovering these issues, we formally served a **Notice of Systemic Safety Failures** to the FSAM Board and PMA Management. You deserve the facts. Please read on.

Official Burlington County Health Department records confirm a revolving door of closures due to dangerous chemical imbalances in our pools and spa. When owners learned these failures occurred during PMA's professional duty hours and no corrective action was taken by the Board, the reaction was clear:

"How can the Board ignore their responsibility? They should fire the PMA staff immediately, then resign themselves. No excuse is possible."

THE CASE FOR IMMEDIATE CHANGE

1. Admitted Awareness

A Board member email dated December 31, 2024 formally acknowledged that the County Health Department closed our facilities due to "chemical imbalance." Despite this written admission over a year ago, the Board has failed to implement a permanent fix, allowing the same dangerous conditions to continue throughout 2025.

2. Vendor Performance (PMA/Candlewood)

The data shows that closures occurred on PMA's watch during the week. Despite this, the Board grants PMA staff weekends off—while residents are expected to volunteer for safety monitoring.

It is a **logic-defying request**: we are being asked to do, for free, the very work we already pay professionals to perform—professionals who have already failed during their contracted hours.

Based on these repeated failures, **resident-led testing may be as reliable—or even more reliable—** than the "professional" oversight we are currently funding.

PMA staff have been in place for over a decade, with an ongoing responsibility to ensure safe water conditions through multiple daily tests. This is not an occasional task—it is a continuous, never-ending responsibility.

If lawfully required monitoring and testing—performed multiple times each day—were being carried out, why did these failures continue—and repeat—without effective correction or bringing pool and spa chemistry back into proper compliance?

3. The Board of Trustees

By failing to correct these documented hazards for over a year after acknowledging them in writing, the Board has breached its moral obligation and fundamental fiduciary duty. How can these risks go unaddressed—especially by Board members who, as healthcare professionals, are trained to recognize danger and act to prevent harm?

Given the publicly documented failures and lack of corrective action, this creates significant liability exposure for the Association. In the event of a claim, these documented facts would be central to the matter.

Over time, the Board has approved more than \$2,000,000 in payments to PMA and Candlewood—the vendors responsible for these services. This is not a small issue. It raises serious questions about oversight, accountability, and what results homeowners were paying for. Given the scale of this investment, homeowners should reasonably expect consistent, professionally competent results. Why has that not been achieved?

The big question: Given that these failures were known and repeated—and present clear health risks to residents and significant liability exposure to the Association—why didn't the Board take local corrective action and request increased Health Department inspections and oversight?

OUR FORMAL DEMAND FOR TRANSPARENCY (3/26/26)

Under the **NJ Radburn Act, homeowners have a lawful right to access these records, and the Board does not have the authority to refuse that access. The Association already funds the Vantaca platform used by management and auditors, so providing access can be done at zero additional cost. We requested that the following be populated in the Vantaca portal by April 10, 2026:

- Official Health Department Inspection Reports (2024–2025)
- Formal Plans of Correction for all safety violations
- Full financial records, including executed vendor contracts and monthly invoices (especially Candlewood and PMA)
- Real-time access to Vantaca-generated daily chemical logs (as required by NJAC 8:26-7.7)

WHAT WE NEED YOU TO DO

1. Ask Direct Questions

The questions raised here are serious—but they are fair and necessary. They go directly to the health and safety of every owner, family member, and guest. The Health Department findings speak for themselves. Homeowners deserve clear answers on why these failures were allowed to continue. **No answers are an answer.**

2. Expect Accountability for What We Fund

Over time, homeowners have funded more than \$2,000,000 in payments to these vendors, along with the systems designed to support proper oversight. The Vantaca platform includes reporting capabilities for pool chemistry and operations—yet those capabilities appear underutilized. Homeowners have a right to ask why.

Where is the oversight? Where is the accountability? Why is there no visible standard applied to vendor performance?

No answers are an answer.

3. Act as Owners

We collectively own this Association. We fund it monthly and invest in its future. With that

comes the right to ask questions—and to expect answers. If clear answers cannot be provided, that itself raises serious concerns.

4. Take Action

- Log into Vantaca and ask why these safety and financial records are not being made available.
- Contact Board members directly—not PMA staff.
- At the next meeting, refer to the December 31, 2024 admission and ask:

“Since the Board acknowledged these failures over a year ago, why is PMA still on site, and why are residents being asked to volunteer for their responsibilities?”

5. Consider This

When snow is not cleared, we can see the risk and choose to be cautious. When safety failures in the pool and spa are not disclosed, we cannot see the risk—and we unknowingly place ourselves and our families in harm’s way.

We have no way of knowing whether residents have already been affected.

Simple truth: Silence rises to the level of neglect in a setting where residents are given no notice of danger—leaving them without the information needed to make safe decisions.

There is **no excuse—nor can there ever be—for placing the entire community’s health at risk.** We deserve a Board and a management team that **prioritizes owner health and safety over misplaced loyalty to PMA and Candlewood.**

Sincerely,

— *Concerned Homeowners for Safety & Transparency*

This is no longer a secret—it is now in the hands of the community.

IMPORTANT: OUR STRENGTH IS IN OUR NUMBERS

We are sending this notice to a limited group of homeowners to start. For this to work, we need **YOU** to help break the silence. The Board can ignore 12 people—but they cannot ignore 400+.

Please forward this. Share this notice by sending a copy, handing a copy to neighbors, or directing them to the QR code below for immediate access to the full materials. The library copier remains a free option for printed distribution.

TO: FSAM Board of Trustees/ PMA

DATE: 3/26/26

RE: FORMAL NOTICE: SYSTEMIC SAFETY FAILURES, FINANCIAL DISCLOSURE, AND DEMAND FOR VANTACA TRANSPARENCY

Dear Board Members,

As several homeowners, in good standing, we are writing to formally request that the Association begin utilizing the **Association Documents** library and the maintenance tracking features within our **Vantaca** portal. This request is made to satisfy the transparency requirements of the **NJ Radburn Act** and to address the critical safety and governance failures documented in the attached **Module 1 – Pool & Spa Inspection Master Analysis**.

1. Evidence of Systemic Negligence (Ref: Module 1 Attached)

The attached analysis of Official Health Department (HD) inspection history for 2024–2025 reveals a deeply concerning pattern of instability in our shared aquatic amenities:

- **Recurring Critical Failures (M1.2 & M1.4):** Multiple "CLOSED" orders were issued due to dangerous chemical swings, including excessive chlorine (FC >15) and repeat failures for under-chlorination.
- **Statistical Extrapolation of Risk (M1.7):** Health Department inspections represent "snapshots" occurring on fewer than 1% of operational days. As detailed in the attached report, failing these random spot checks is not an isolated occurrence; it is a diagnostic indicator of systemic, day-to-day mismanagement.
- **The "Egregious" Pattern:** If the facility is found out of compliance during the tiny fraction of time an inspector is present, it is a mathematical certainty that residents—including our vulnerable senior population—are being exposed to unmonitored and unsafe conditions during the vast majority of the year.

2. Failure of Governance and Duty of Care (M1.6)

The recurring nature of these violations (identically repeating within days or months) indicates an absence of preventive controls and a failure to perform root-cause analysis after closures. As established in **M1.6**, the Board's duty to provide a safe environment is non-delegable. Permitting operation without stable chemical control is a breach of fundamental duties of care and **NJAC 8:26** standards.

3. Demand for Immediate Digital Visibility via Vantaca

The Vantaca platform, which we already fund, is designed to handle the exact transparency needed to mitigate these risks. We all request the Board take the following steps:

- **Financial & Contractual Disclosure:** Upload all **Executed Vendor Contracts** (including Pool Management/CPO) and **Monthly Expense Invoices** to a "Homeowner Access" folder. The entire community must be able to verify if the professional services we are paying for are meeting their contractual and safety obligations.

- **Real-Time Safety Logs (NJAC 8:26-7.7):** New Jersey law mandates daily chemical logs. We request that the Board utilize Vantaca's tracking capabilities to digitize these logs and grant "**Homeowner Visibility**" (**View-Only**).
- **Proactive Oversight:** Granting residents the ability to verify water safety *before* entering the water removes the "Snapshot" risk and replaces it with continuous accountability.

Conclusion

Transparency is the Association's best defense against liability. By "opening the books" (Radburn Act) and the safety logs on Vantaca, the Board moves from a reactive, "catch-me-if-you-can" maintenance style to proactive, modern governance.

We all look forward to seeing the **2024–2025 Official HD Inspection Reports, Plans of Correction, and Financial Records** populated in the Vantaca portal by April 10th, 2026.

Sincerely,

Concerned Homeowners

Attachment: *Module 1 – Pool & Spa Inspection Master Analysis (M1.1–M1.7)*

Module 1 – Pool & Spa Inspection Master Analysis (Reference Edition)

COMPLETE MODULE (M1.1–M1.7 restored and updated)

M1.1 Scope & Purpose (Reference)

This module is a reference-only analysis of Health Department inspection history for the FSAM Outdoor Pool, Indoor Pool, and Indoor Spa from 2024–2025. It is designed as a stable export for later final writing. Aquatic safety responsibility is treated as collective and non-delegable.

M1.2 Chronological Inspection Index (2024–2025)

Condensed index of key inspections and enforcement events.

Date	Facility	Inspection Type	Key Findings	Outcome	Notes
12/30/2024	Indoor Pool	Full	Excessive chlorine FC>15	CLOSED	Over-chlorination
12/30/2024	Indoor Spa	Full	High chlorine/pH, FC>10	CLOSED	Chemical instability
12/31/2024	Indoor Pool & Spa	Reinspection	Near limits	Reopened	Marginal compliance
7/24/2025	Outdoor Pool	Full	Low chlorine	CLOSED	Under-chlorination
7/30/2025	Indoor Pool	Full	Low chlorine	CLOSED	Repeat failure
7/30/2025	Indoor Spa	Full	Low chlorine	CLOSED	Repeat failure
12/29/2025	Indoor Pool	Full	FC 13.6 / pH 8.0	No closure	Item 81 OUT
12/29/2025	Indoor Spa	Full	FC 9.8 / pH 7.8	Operational	Item 81 IN

M1.3 High-Level Patterns (Reference Notes)

- Chemical instability in both high and low directions.
- Repeat non-conformances within short timeframes.
- Inspections function as snapshots, not continuous assurance.
- No documented root-cause analysis or redesign after closures.

M1.4 Major Events & Closures (Reference Notes)

- 12/30/2024: Indoor Pool and Spa closed (over-chlorination).
- 7/24–7/30/2025: Repeat closures for low chlorine.
- 12/29/2025: Indoor Pool high chlorine without closure.

M1.5 How This Module Is Used (Reference)

Use this module as the factual and analytical backbone for final writing. M1.2–M1.4 establish chronology and patterns; M1.6 provides governance findings.

M1.6 Governance Finding – Failure to Prevent Re-Occurrence

The lack of effective corrective action is demonstrated by repeated closures and recurring chemical non-conformances between December 2024 and December 2025. Identical failures recurred within days or months, indicating absence of preventive controls.

Candlewood (CPO) and PMA local staff permitted operation without stable chemical control. Where unsafe conditions cannot be promptly and reliably corrected, best practices, basic safety principles, Health Department standards under NJAC 8:26, and fundamental duties of care require continued closure until compliance is demonstrated.

There is no evidence of consequences, accountability, or structural change following violations. Failures were treated as routine interruptions rather than safety events, leaving residents—particularly seniors—exposed to preventable risk.

Note: it is expressed that the Health Department inspections represent snapshots of just 2-3 days results out of 365 and random. If we can thereby extrapolate the results a common instance of irresponsibility, it becomes even more egregious.

M1.7 Statistical Extrapolation of Risk

It must be noted that Health Department inspections represent "snapshots" of performance, occurring on fewer than 1% of operational days. When critical failures—such as chemical instability and closures—are identified during these random, infrequent windows, it is statistically improbable that these are isolated incidents.

Rather, these results serve as a diagnostic indicator of a systemic, day-to-day failure in pool chemistry management. If the facility is found out of compliance during a scheduled or random inspection, it must be inferred that residents are being exposed to unmonitored and unsafe conditions during the vast majority of the 365-day calendar. To treat these as "one-off" events is a failure of oversight; they are symptomatic of a continuous breach of safety standards.