## **COMPLAINT FORM**

A Complaint must constitute a threat to public safety or zoning issues.

The Building Department requires all complaints be submitted in writing on a complaint form.

Without a signed written complaint, the Department cannot access any property to investigate a problem.

1.	COMPLAINTANT INFORMATION			
	Name: *	_		
	Street Address: *		Zip	
	Phone #: *Cell Number #: *_			
	Email: *			
2.	LOCATION OF COMPLAINT			
	Owner's Name: *			
	Street Address: *	_ State	Zip	
	Phone #:Cell Number: *			
3.	Describe in detail the nature of the complaint: * (please	s use officer sic		is needed)
4.	Specific code violation: *			
5.	Provide any additional information that might help the	e investigat	ion:	
Sig	gn here: * Date: *			

\*MUST BE INCLUDED FOR FURTHER ACTION

**FOR OFFICE USE:** 

**Building Department Action:**