

Complaint Form

Date:

Complainant's Name:

Complainant's Follow-up Method:

Phone:

Email:

Fax:

Property Owner:

Property Address:

City, Zip:

Phone Number of Owner:

Other contact method for Owner:

Nature and Description of Complaint:

Inspections Use Only

Date Received:

Clerical Member:

Inspector

Assigned:

Notes regarding follow-up with Municipality:

Date:

Route to: