

Cross Roads Borough COMPLAINT FORM

Please complete this form in its entirety. Incomplete submissions will not be accepted. This form must be submitted to Dependable Construction Code Services at 99 Theater Lane, York, PA 17402 or emailed to info@dccsinspectors.com.

Date: _____

Complainant Name: _____

Address: _____

Telephone Number: _____

Email Address: _____

Address of Offending Property: _____

Complaint:

Do we have permission to enter your property to investigate your complaint? YES NO

Complainant Signature: _____

(By signing this form, you agree that the information contained herein, including your identity as the complainant, may be used in court if necessary to adjudicate violations.)

ADMIN USE ONLY

Date Received: _____

Complaint/Violation Number: _____