

# CODE ENFORCEMENT COMPLAINTS

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone #: \_\_\_\_\_

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Name of violator: \_\_\_\_\_

Violator's address: \_\_\_\_\_

\_\_\_\_\_

Violator's Phone # (if known): \_\_\_\_\_

Nature of complaint (please be specific): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*This complaint will be treated with confidentiality. Please print legibly.*

For official use only \*\*\*\*\*

Date received: \_\_\_\_\_

Response: \_\_\_\_\_

\_\_\_\_\_  
Code Enforcement Officer (signature)