

Nuisance Complaint Form

Date _____

Location or Address of Violation _____

Description of Violation _____

Person Filing Complaint (Optional) _____

Phone Number _____

Email Address or Mailing Address _____

Would you like a follow up response? Yes _____ No _____

DO NOT WRITE BELOW THIS LINE – (For Internal Use Only)

Date received by the Clerk _____ Received by (Int) _____

Date received by Ordinance Enforcement Officer _____ Received by (Int) _____

Investigation (Attach Photos) _____

Violation (Ordinance, section, subsection) _____

No Violation Found _____

Enforcement Officer _____

Date _____