

Complainant Information:

Name: _____

Address: _____

Phone : (where you can be reached during daytime) _____

Do you request a follow up phone call? Yes No

Please understand all unsafe/zoning complaints filed with the Department of Community Development are public record and may be accessed by general public.

Complaint's signature

Date

DEPARTMENT USE ONLY

Site inspection date: _____

Determination of Violation: _____

Date Notice Sent: _____

Completion of request: _____

Staff Member Name: _____