

# COMPLAINT FORM

*A Complaint must constitute a threat to public safety or zoning issues.  
The Building Department requires all complaints be submitted in writing on a complaint form.  
Without a signed written complaint, the Department cannot access any property to investigate  
a problem.*

## 1. COMPLAINANT INFORMATION

Name: \* \_\_\_\_\_  
Street Address: \* \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone #: \* \_\_\_\_\_ Cell Number #: \* \_\_\_\_\_  
Email: \* \_\_\_\_\_

## 2. LOCATION OF COMPLAINT

Owner's Name: \* \_\_\_\_\_  
Street Address: \* \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone #: \_\_\_\_\_ Cell Number: \* \_\_\_\_\_

## 3. Describe in detail the nature of the complaint: \* (please use other side if more room is needed)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## 4. Specific code violation: \*

\_\_\_\_\_  
\_\_\_\_\_

## 5. Provide any additional information that might help the investigation:

\_\_\_\_\_  
\_\_\_\_\_

Sign here: \* \_\_\_\_\_ Date: \* \_\_\_\_\_

**\*MUST BE INCLUDED FOR FURTHER ACTION**

**FOR OFFICE USE:**

Building Department Action: