



CODE ENFORCEMENT COMPLAINT FORM

ADDRESS OF COMPLAINT: _____

COMPLAINT:

- Garbage Furniture or Appliances Yard Waste Animal Waste
- Stored, damage or inoperable vehicle Vehicle parts or tires

OTHER COMPLAINT OR ADDITIONAL INFORMATION:
(PLEASE BE SPECIFIC)

OPTIONAL:

Complaints may remain anonymous. If you choose to give your contact information, please be aware that this information will become part of the file and will be available to anyone who reviews this file, including the person who may be receiving the complaint. If you would like a status update on the complaint feel free to contact us.

Complainants Name: _____

Address: _____ Phone: _____

E-mail: _____