



CITIZEN COMPLAINT FORM

Date: _____

Complainants Name: _____

Complainants Address: _____

Contact Phone Number: _____

Location of Violation (address):

Directions to the Site:

Nature of Violation:

Inspector: _____ Inspection Date: _____

Inspection Results & Remedies:

Please return the completed complaint form to Rachael Anderson, Code Enforcement Officer in Room 108 of the Old Historical Courthouse.