



DATE: _____
CASE #: _____

CODE ENFORCEMENT
NUSIANCE COMPLAINT FORM

Address of Complaint: _____

Property Owner/Resident: _____

Property Legal Description(s):

Subdivision: _____ Block: _____ Lot: _____

Section: _____ Township _____ Range: _____

Extended Legal Description: _____

Violation Category: (Check All Applicable)

Grass/Weeds <input type="checkbox"/>	Trash/Junk <input type="checkbox"/>	Vehicles <input type="checkbox"/>	Appliances <input type="checkbox"/>
Zoning Issues <input type="checkbox"/>	Dilapidated Structure <input type="checkbox"/>	Street Signs <input type="checkbox"/>	Dead Trees <input type="checkbox"/>

Other: _____

Person(s) Making Complaint: ***We make every effort to maintain utmost confidentiality. ***

Name: _____

Phone #: _____

Address: _____

Action Taken: _____

Date of Action: _____

Results: _____

