## Code & Ordinance Violation Complaint Form

**OFFICE USE ONLY**					
Date Received:					
Received By:					
PMT #:					

-							
Address of Subject I	Property:					Residential 🗖	Commercial
Complaina	nt Name:						
Complainant	Address:						
Complainant	Phone #:						
Complainant Email	Address:						
Complainant S	ignature:						
Is the violation visible f	rom the pu	ublic right-o	f-way? Ye	s 🗆 No 🗖			
Do we have consent to e	enter upon	your proper	ty to view t	ne violation?	Yes 🗖 📑	No □ (contact i	nfo required)
Description of the violat	ion:						
_							
			**0FFICE	TICE ON IT NAME			
- 477 1 1			**OFFICE	USE ONLY**			
Type of Violation:							
Code Section:							
Property PIN:							
Initial inspection comm	ants						
initial hispection commo	ents.						
Property Owne	er:						
Owner Addres							
City, State, Zi							
Phone	_						
County Recorder Doc							

All details are strictly confidential until such time that the complainant must legally be identified due to legal proceedings or the filing of a Right to Know Petition.