



CODE COMPLIANCE COMPLAINT FORM

NOTE: ALL SECTIONS MUST BE COMPLETE FOR THE TOWN TO ACT ON THE MATTER.

WITNESS/COMPLAINANT-

Name: _____

Address: _____

Phone: _____ Email: _____

Signature: _____ Date: _____

VIOLATION LOCATION

Assessor's Parcel Number (APN#): _____

Address: _____

Property Owner (if known): _____

COMPLAINT TYPE

- Housing/Building Code
- Vacant/Abandoned Building
- Junk/Debris
- Visual Blight
- Overgrown Weeds/Grass
- Outside Storage
- Abandoned/Inoperable Vehicles
- Parking on Unimproved Surfaces
- Fences
- Signage
- Unlicensed Businesses
- Un permitted construction
- Other; Describe:

VEHICLE INFORMATION (IF APPLICABLE):

Make: _____

Model:

Color:

License Plate:

ATTACHMENTS:

If applicable, label and submit pictures or maps which would support this report. Include witness information (full name, phone, and mailing address)

DESCRIPTION OF VIOLATION: