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CODE ENFORCEMENT COMPLAINT FORM

DATE: _____

NAME: _____

STREET ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE #: _____

LOCATION OF VIOLATION (Address):

NEAREST INTERSECTION: _____

Check Types of Violation:

- Noise
- Building Maintenance
- Accessory Uses
- Permits
- Drainage
- Water Quality
- Graffiti
- Signs
- Business Violations
- Trash
- Weeds
- Vehicles
- Other

DESCRIPTION OF VIOLATION: _____
