

CODE ENFORCEMENT COMPLAINT

DATE: _____

COMPLAINANT'S NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE (HOME): _____ WORK: _____

NAME OF PERSON OR PROPERTY BEING COMPLAINED ABOUT:

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE (HOME): _____

VEHICLE INFORMATION (IF APPLICABLE)

MODEL: _____ MAKE: _____ YEAR: _____

COLOR: _____ BODY STYLE: _____ SPECIAL FEATURES: _____

LICENSE PLATE: _____ STATE OF REGISTRATION: _____

LOCATION OF OFFENSE: _____

TYPE OF PREMISES: _____

WHAT IS YOUR COMPLAINT? (Describe with as much detail as possible – use as many pages as necessary to fully, fairly, and honestly relate all material facts and circumstances.)

I swear that the statements made herein are within my personal knowledge and are true and correct

Complainant's Signature

Date