

# LAND USE & BUILDING CODE COMPLAINT FORM

## LOCATION OF ALLEGED VIOLATION

\_\_\_\_\_  
Address *(Must be Exact!)*

\_\_\_\_\_  
Owner's Name(s) *(If Known)*

\_\_\_\_\_  
Owner's Phone Number *(If Known)*

\_\_\_\_\_  
Tenant's Name *(If Appropriate)*

## COMPLAINANT INFORMATION

Check if this Complaint is Confidential\*

\_\_\_\_\_  
Name *(If Agency, Contact Person & Title)*

\_\_\_\_\_  
Agency Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone Number

## BRIEF DESCRIPTION OF ALLEGED VIOLATION:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## DESCRIBE NATURE & EXTENT OF RISK OF HARM:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## DESCRIBE AVAILABLE PROOF REGARDING THE ALLEGED VIOLATION:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ARE YOU WILLING TO PROVIDE EVIDENCE AND TESTIFY, IF NEEDED?

YES (  )

NO (  )

OTHER WITNESSES: *(List of Names, addresses and ph. #'s of other potential witnesses)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Complainant's Signature

**\*Per county policy confidential complaints cannot be inspected unless there are two complaints filed within one half mile of the property with the alleged violation. Although confidential complainant personal information is protected from public records requests, it might be subject to disclosure in court.**