



# Complaint Form

# CE-1

## BUILDING / CODE ENFORCEMENT - COMPLAINT FORM

*FORM MUST BE SIGNED AND DATED*

ADDRESS OF VIOLATION \_\_\_\_\_

PROPERTY OWNER NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

CURRENT OCCUPANT \_\_\_\_\_

Please state the issue including all information regarding the alleged violation (addresses, names, dates, etc).  
Use the back of this form if additional space is needed.

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

Have you filed a complaint with any other agency regarding this issue? YES  NO

If so, which agency, name and telephone of the individual you were in contact with \_\_\_\_\_

Do you wish your name to be kept confidential? YES  NO

Are you willing to appear in court if necessary? YES  NO

\_\_\_\_\_  
COMPLAINANT - Print Name

\_\_\_\_\_  
COMPLAINANT - Signature

\_\_\_\_\_  
COMPLAINANT ADDRESS

(\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
COMPLAINANT TELEPHONE NO.

\_\_\_\_\_  
DATE OF COMPLAINT

### FOR CITY USE ONLY

\_\_\_\_\_  
DATE RECEIVED

\_\_\_\_\_  
CASE NO.

\_\_\_\_\_  
REFERRED TO

\_\_\_\_\_  
RECEIVED BY