## CODE ENFORCEMENT REQUEST FOR INVESTIGATION

Shaded Areas to be completed by staff		Date Stamp:
Case File Number:	Nuisance: Zoning:	
INCOMPLETE INFORM	Other:	
Nature of Complaint:	OCT IN NO ENFORCEMENT AC	IION
Condition requiring correction: check all that app	ply	
[ ] Nuisances	[ ] Property Maintenance	[ ] Vegetation
[ ] Vehicle ~ Junk/Storage	[ ] Garbage	[ ] Zoning
Address of Complaint:		
Property Owner's Full Name: First, Middle, Last		Home Phone:
Residing Address: Street, City, State, Zip		Work Phone:
		Tax Parcel Number:
Property where violation exists: Street, City, Stat	te, Zip	
		Lot, Block, Tract:
Cross Street (Directions)		Zoning:
Complainant:		•
	necessary before code enforcement	services can investigate.
Anony	mous complaints will not be accept	ted.
Name:		Home Phone:
Residing Address: Street, City, State, Zip		Work Phone:
Notes:		-
or who file complaints with investigative, lav disclosure would endanger any person's life, victim or witness indicates a desire for disclo	Information revealing the identity of persons of the ventor of persons of the ventor of persons of the ventor of ventor of the ventor of	nan the public disclosure commission, if complaint is filed the complainant, rn.
[ ] I do not wa	ant my identifying information to	be disclosed.
Signature of Complainant:		Date:

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Space Below Reserved for Code Enforcement Use Only			
Comments and/or Action Taken	Date:		