

NEW COMPLAINT NOTIFICATION & STATUS SHEET

COMPLAINT RE: _____

PROPERTY ADDRESS: _____

NAME(S) OF OWNER(S)/TENANT(S): _____

Owner(s): _____

ADDRESS(ES) OF OWNERS - (If Different from Property Address): _____

DATE OF COMPLAINT: _____

NATURE OF COMPLAINT: _____

**NAME, ADDRESS, PHONE NO., & SIGNATURE OF COMPLAINANT ARE
REQUIRED ON THE REVERSE SIDE OF THIS FORM FOR THE COMPLAINT
TO BE VALID. (This information is kept confidential.)**

**RETURN THE COMPLETED AND SIGNED FORM TO: CITY ADMINISTRATOR'S OFFICE
CITY HALL**

For Office Use:

Date of Receipt of Complaint: _____

Action Taken: _____

Pictures Taken: _____ Letter Sent: _____

Cleanup/Resolution Deadline: _____

Follow-up: (Cleanup/Removal/Request for Hearing before Nuisance Board, etc.)/Date: _____

REQUIRED INFORMATION:

(This information is not released to owners or tenants of above property or anyone else.)

Name of Complainant: _____

Address of Complainant: _____

Telephone No. of Complainant: _____

X _____
Signature of Complainant