



Code Enforcement Complaint

Complaint Information

Location of Complaint _____ GRID No _____

Please explain the nature of the complaint

Reported By _____

Address _____ Phone No _____

Action Taken

Office Use Only				
Incident No				Received By
Date Received				Time Received
Method Received	<input type="checkbox"/> Phone	<input type="checkbox"/> Walk In	<input type="checkbox"/> Patrol	<input type="checkbox"/> Email <input type="checkbox"/> Letter
Complainant Notified	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Assigned to	Date