



## NUISANCE/LAND USE COMPLAINT FORM

Date: \_\_\_\_\_

Your Name (**REQUIRED**): \_\_\_\_\_

Your Address: \_\_\_\_\_

E-mail (Preferred): \_\_\_\_\_

Telephone: \_\_\_\_\_

Property Owner (if known): \_\_\_\_\_

Property Address/Location (**REQUIRED**): \_\_\_\_\_

Details of the complaint (**REQUIRED**):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please check all that apply:

- |  |                                     |  |
|--|-------------------------------------|--|
| <input type="checkbox"/> Land Use violation (building without a permit, land use does not conform to zoning, etc.) |                                     |  |
| <input type="checkbox"/> Abandoned/junked Vehicles   | <input type="checkbox"/> Tires      | <input type="checkbox"/> Trash/Junk      |
| <input type="checkbox"/> Buildings   | <input type="checkbox"/> Appliances | <input type="checkbox"/> Light pollution |
| <input type="checkbox"/> Other:  |                                     |  |

I would like to be updated on the resolution:       Yes       No

I wish to remain anonymous:       Yes       No