

# BLIGHT / ZONING COMPLAINT FORM

Date Complaint Filed \_\_\_\_\_ Time Complaint Filed \_\_\_\_\_

Location of Complaint \_\_\_\_\_

**WE DO NOT TAKE ANONYMOUS COMPLAINTS**

Person / Entity Filing Complaint \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

Date Activity Occurred \_\_\_\_\_ Time of Activity \_\_\_\_\_

Nature of Complaint: Describe, in detail, the issue at hand. Attach photos and maps to evidence issue if possible. **DO NOT TRESPASS ON PROPERTY!**

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**THIS SECTION IS FOR STAFF ONLY:**

**Date of Initial Inspection** \_\_\_\_\_

**Date of Follow-Up Inspection** \_\_\_\_\_

**Violation(s) Sec(s)** \_\_\_\_\_

**Resolution / Notes** \_\_\_\_\_

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**DATE RECEIVED BY PLANNING AND ZONING:**