

Complaint Form

Complainant: _____

Address: _____

Telephone: _____ (Home) _____ (Work)

Signature: _____

Complainant

Date

Nature of Complaint: _____

Location of Complaint – Town/Village _____

Address: _____

Directions to Location: _____

Landowner/Responsible Party: _____

Address: _____

Telephone: _____ (Home) _____ (Work)

If Residential Property, is Occupancy: Year Round: _____ Seasonal: _____

If Rental Property – Name of Occupant(s): _____

Sanitarian: _____

Complaint Resolved – Yes: _____ No: _____ If “yes”, Date Resolved _____