

VIO: \_\_\_\_\_

Assigned to: \_\_\_\_\_

# Violation Complaint Form (All Items Must Be Completed)

1. Violation Type:     Zoning       Nuisance / Abandoned Vehicle(s)     Building  
                                   Grading / Land fill       Vegetation / Tree removal

Description of Complaint: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Relevant Ordinance Sections: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**2. Location of Alleged Violation:**

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

APN(s): \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 Zoning: \_\_\_\_\_

**3. Names of Alleged Violators:**

Property Owner: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Phone: \_\_\_\_\_

**4. Complaint Received By:**

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

- Initiated By: (check one)**  
 Phone                       Counter  
 Letter                       Other Department  
 Drive by Observation     FAX  
 Unrelated Inspection

(Complete Item 6 on reverse)

