COMPLAINT FORM

Date/Time: _____

Report Taken By: _____

Tax Parcel Number: Section: _____ Block: _____ Lot: _____

COMPLAINT OF VIOLATION

Form of Complaint: ☐ Telephone ☐ Letter (attach) ☐ In Person

Complainant: _____

Address: _____

Phone: _____

Site Location: _____

Property Owner: _____

Nature of Complaint: _____

_____

_____

_____

ACTION BY ENFORCEMENT:

Possible violation of article_____, Section_____, Subsection_____ of the

Village of Lakewood _____ Law

New York State Code: section _____, subsection _____

Site Inspection completed on _____ (date) at _____(time) [am/pm]

Report of Findings: _____

_____

_____

_____

Recommended Action: _____

_____

_____

_____

_____

Code Enforcement Officer