



Blight Ordinance Complaint Form

Name of Person making Complaint: _____

Address: _____

Mailing Address (if different): _____

Telephone #: (H) _____ (W) _____

Location of Complaint: _____

Description of Complaint: _____

I hereby give permission for Town Officials to enter upon my property for the sole purpose of investigating the above complaint.

Signature: _____ Date: _____

Received by Enforcement Officer: _____ Inspection Date: _____

Map _____ Block _____ Lot _____

Subject Property Owner: _____

Mailing Address: _____ Telephone #: _____

Results of Field Investigation: _____

Phone Call _____

Written Warning _____

Formal Notification _____

Citation _____

Signature of Investigating Official

Date