

# 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): \_\_\_\_\_

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Sanitarian: \_\_\_\_\_

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