



# ACTION REQUEST FORM

## COMPLAINT INFORMATION

**A. Location (Street Address):** \_\_\_\_\_

Tax PIN \_\_\_\_\_

**Vacation Rental? YES/NO**

**B. Complaint Submitted by:** \_\_\_\_\_

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

Tel No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_ E-mail: \_\_\_\_\_

### C. Summary of Complaint:

### Notes:

**FOR OFFICE USE ONLY:**

Complaint Taken By: \_\_\_\_\_ Date: \_\_\_\_\_

Complaint Referred To: \_\_\_\_\_ Date: \_\_\_\_\_

**NATURE OF COMPLAINT: (CHECK ALL THAT APPLY)**

<b>Submit to Community Development Dept</b>		<b>Submit to Police Dept</b>	
<input type="checkbox"/>	Unauthorized Development/ Site Improvements	<input type="checkbox"/>	Noise
<input type="checkbox"/>	Unauthorized Activity in a Residential District	<input type="checkbox"/>	Littering
<input type="checkbox"/>	Unauthorized Outdoor Storage	<input type="checkbox"/>	Trespassing
<input type="checkbox"/>	Sign Installation / Sign Maintenance	<input type="checkbox"/>	Unruly behavior
<input type="checkbox"/>	Failure to Comply with Development Standards	<input type="checkbox"/>	Blocking traffic
<input type="checkbox"/>	Failure to Comply with Conditions of Zoning Approval	<input type="checkbox"/>	Parking Violation
<input type="checkbox"/>	Tall grass and weeds	<input type="checkbox"/>	Animal complaints
<input type="checkbox"/>	Junk, trash, and debris	<input type="checkbox"/>	Improper Discharge of Firearm
<input type="checkbox"/>	Other _____	<input type="checkbox"/>	Abandoned or Junk Vehicle
<b>Submit to Public Works Dept</b>		<input type="checkbox"/>	Other _____
		<b>Submit to Fire Dept</b>	
<input type="checkbox"/>	Intersection Visibility Blocked	<input type="checkbox"/>	Outdoor Burning
<input type="checkbox"/>	Ice/Snow on Roads	<input type="checkbox"/>	Inoperable or No Smoke/Carbon Monoxide Detectors
<input type="checkbox"/>	Road Too Narrow	<input type="checkbox"/>	Improper Use of Extension Cords
<input type="checkbox"/>	Lack of Road Shoulder	<input type="checkbox"/>	Failure to Post Evacuation Plans
<input type="checkbox"/>	Tree Across Road	<input type="checkbox"/>	Blocked or Inoperable Emergency Egress
<input type="checkbox"/>	Clogged/Inoperable Stormwater Culvert	<input type="checkbox"/>	Other _____
<input type="checkbox"/>	Ditches Filled with Debris	<b>Submit to Lake Operations Dept</b>	
<input type="checkbox"/>	Inoperable Streetlight	<input type="checkbox"/>	Lake Use Violation
<input type="checkbox"/>	Foul Smelling/Tasting Drinking Water	<input type="checkbox"/>	Lake Structure Violation
<input type="checkbox"/>	Lack of Water Pressure	<input type="checkbox"/>	Other _____
<input type="checkbox"/>	Leaking Water Line	<b>Submit to Environmental Management</b>	
<input type="checkbox"/>	Other _____	<input type="checkbox"/>	Unauthorized grading or land clearing
<input type="checkbox"/>		<input type="checkbox"/>	Sedimentation damage (erosion)
<b>Submit to Sewer Collections Dept</b>		<input type="checkbox"/>	Other _____
		<b>Submit to Code Enforcement Officer</b>	
<input type="checkbox"/>	Clogged Sewer Lines	<input type="checkbox"/>	Street/Sidewalk maintenance
<input type="checkbox"/>	Odor Coming From Manhole	<input type="checkbox"/>	Inadequate Garbage Receptacles
<input type="checkbox"/>	Other _____	<input type="checkbox"/>	Abandoned Structure
<input type="checkbox"/>		<input type="checkbox"/>	Other _____

**COMPLAINT STATUS:**

Complaint Valid: [ ] Yes [ ] No Date Case Resolved \_\_\_\_\_ Applicant Contacted: [ ] Yes [ ] No