



CITY OF MCRAE-HELENA_{est.2015}

CODE ENFORCEMENT COMPLAINT FORM

Your complaint will be prioritized first and foremost by health and safety issues.

Anonymous complaints will be responded to at the discretion of the City.

COMPLAINANT INFORMATION

NAME: _____ DATE: _____

ADDRESS: _____ PHONE: _____

SIGNATURE _____ DATE: _____

COMPLAINT INFORMATION

LOCATION OF POSSIBLE VIOLATION: _____

CHECK ALL THAT APPLY:

- | | | |
|--|--|--|
| <input type="checkbox"/> LITTER/TRASH | <input type="checkbox"/> MULTI- FAMILY/
DWELLING SPACE | <input type="checkbox"/> DANGEROUS/
UNINHABITABLE STRUCTURE |
| <input type="checkbox"/> JUNK/ DEBRIS | <input type="checkbox"/> ELECTRICAL PROBLEM | <input type="checkbox"/> VACANT (UNSECURED)
STRUCTURE |
| <input type="checkbox"/> OVERGROWTH (OVER 12") | <input type="checkbox"/> LIGHT/ VENTILATION
PROBLEM | <input type="checkbox"/> POULTRY/ LIVESTOCK |
| <input type="checkbox"/> INOPERABLE VEHICLE(S) | <input type="checkbox"/> EXTERIOR/ INTERIOR
STRUCTURE PROBLEM | <input type="checkbox"/> COMMERCIAL VEHICLE |
| <input type="checkbox"/> UNREGISTERED
VEHICLE(S) | <input type="checkbox"/> SANITARY FACILITY
PROBLEM | <input type="checkbox"/> RECREATIONAL VEHICLE |
| <input type="checkbox"/> IMPROPER BUSINESS
LOCATION | <input type="checkbox"/> ACCESSORY STRUCTURE | <input type="checkbox"/> UNLAWFUL SIGN |
| <input type="checkbox"/> NO PERMIT | | <input type="checkbox"/> NO HEAT/ ELECTRICITY |
| <input type="checkbox"/> UNLAWFUL RESIDENCE | | |

DESCRIBE COMPLAINT: _____

OFFICE USE ONLY:	RECEIVED BY: _____	DATE: _____
OWNER: _____	ADDRESS: _____	
REPORT: _____	_____	
_____	_____	
_____	_____	
<input type="checkbox"/> VIOLATION OBSERVED		
<input type="checkbox"/> NO VIOLATION FOUND		
CODE ENFORCEMENT OFFICER: _____	DATE: _____	