COMPLAINT FORM

Complaint Information:

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Owners Name & Address (If Known)

_____
_____
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_____

Your Name, Address & Phone #

_____
_____
_____
_____

_____
Signature

It is the policy of the Board of Selectmen that complaints on code infractions be in writing. This information is confidential and is used for record keeping purposes only. If you do not feel comfortable filling out this form, please feel free to discuss the matter with the Board of Selectmen.

Received on Date:_____, 20_____

Inspection Made on Date:_____, 20_____

Comments:

_____
Code Enforcement Officer