

DATE: _____

COMPLAINT #: _____

**CHARTER TOWNSHIP OF BREITUNG
COMPLAINT FORM**

Complainant:

Name: _____

Address: _____

Telephone: _____

Email: _____

Location of alleged violation: _____

Nature of Complaint: _____

Defendant/Responsible Party:

Name: _____

Address: _____

Telephone: _____

Parcel #: _____

DATE: _____

COMPLAINT #: _____

OFFICE USE ONLY

Investigation:

Date: _____ Person Receiving Complaint: _____

Complaint Assigned To: _____

Findings: _____

Action Taken: _____

Final Disposition: _____
