RFE/FSO COMPLAINT FORM

Date Filed: __________
Complaint #: __________

LOCATION OF NUISANCE:

Business Name: __________________________

Address: __________________________ City: __________

DESCRIPTION OF CONDITIONS:

________________________

________________________

________________________

Complaint Filed: In Person: _____ By Letter: _____

Complainant Name: __________________________ Phone #: __________________________

Complainant Address: __________________________ City: __________ Zip: ______

Complainant Signature: __________________________

Inspection Date: _______ By: _______ Orders Sent: _____ Abate by: _______

1st Reinspection: _______ By: _______ Orders Sent: _____ Abate by: _______

2nd Reinspection: _______ By: _______ Orders Sent: _____ Abate by: _______

3rd Reinspection: _______ By: _______ Orders Sent: _____ Abate by: _______

Other Action: __________________________

No Nuisance Found: __________________________

By: __________________________ Abated Date: __________

(Revised 10-10-16)