

# Code Compliance Program SERVICE REQUEST FORM

Date of Complaint: \_\_\_\_\_

Case #: \_\_\_\_\_

URGENT

## Nature of Complaint

- |   |  |                                      |
|---|--|--------------------------------------|
| <input type="checkbox"/> Animal               | <input type="checkbox"/> Health / Safety       | <input type="checkbox"/> Weeds       |
| <input type="checkbox"/> Building w/o Permits | <input type="checkbox"/> Setbacks              | <input type="checkbox"/> Yard Sales  |
| <input type="checkbox"/> Fences               | <input type="checkbox"/> Signs                 | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Garbage/Trash        | <input type="checkbox"/> Substandard Buildings |                                      |
| <input type="checkbox"/> Illegal Dumping      | <input type="checkbox"/> Inoperable Vehicle    |                                      |

**Address of Violation:** \_\_\_\_\_

- Vacant Property       Rental Property

## **Apartment/Landlord Information**

Apartment Complex Name: \_\_\_\_\_

Manager Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Date Issue Began: \_\_\_\_\_

Specific Description: \_\_\_\_\_

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### Reporting Party Information (Not Required)

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

## Field Investigation

Date: \_\_\_\_\_ Investigator: \_\_\_\_\_

Comments: \_\_\_\_\_

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