



**TOWN OF MEDWAY**  
COMMONWEALTH OF MASSACHUSETTS  
**BUILDING DEPARTMENT**

*Medway Town Hall  
155 Village Street  
Medway, MA 02053  
Phone (508) 533-3253*

**Building Department  
Complaint Form**

Today's Date: \_\_\_\_\_

Complainants Name: \_\_\_\_\_  
Complainants Address: \_\_\_\_\_  
Complainants Contact Number: \_\_\_\_\_  
Complainants Email Address: \_\_\_\_\_

Name of Complaine: \_\_\_\_\_  
Address of Complaine: \_\_\_\_\_  
Date(s) of Alleged Violation(s): \_\_\_\_\_  
Nature of Violation(s): \_\_\_\_\_

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This is a formal request for enforcement of an alleged violation of the Town of Medway's Zoning Bylaw as well as Massachusetts' State Building Code.

Within 14 days of your receipt of this request, I anticipate a response stating any action or refusal to act upon this complaint and reasoning therefore.

I believe the above facts are true and understand that it is necessary for the Town of Medway to institute legal action in the courts. Therefore, I agree to testify as a witness on behalf of the Town of Medway should my concerns escalate. I also understand that any concerns I submit anonymously may not be looked into, nor will I receive the results of any outcome.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_