

COMPLAINT # _____

LOCATION _____



Property & Grounds Inspector
 2801 89th Street – Sturtevant, WI 53177 – (262) 886- 7201

PROPERTY AND GROUNDS INSPECTION COMPLAINT FORM

NAME OF COMPLAINANT: _____

DATE OF COMPLAINT: _____ COMPLAINT TAKEN BY: _____

ADDRESS: _____

CONTACT PHONE NUMBER: _____

LOCATION OF VIOLATION: _____

NATURE OF VIOLATION:

- | | |
|---|--|
| <input type="checkbox"/> SIDEWALK | <input type="checkbox"/> SNOW REMOVAL |
| <input type="checkbox"/> BUILDING SAFETY | <input type="checkbox"/> WEEDS/GRASS |
| <input type="checkbox"/> DANGEROUS TREES | <input type="checkbox"/> JUNK/ABANDONED AUTO |
| <input type="checkbox"/> SANITATION/GARBAGE | <input type="checkbox"/> SUMP PUMP DISCHARGE |
| <input type="checkbox"/> OTHER (describe) _____ | |

COMMENTS: (continue on a separate sheet of paper if needed)

OFFICER/DPW ASSIGNED	COMPLAINT#	Resolution:	DATE	In Compliance	
				Yes	No
		Inspection Conducted			
		Notice to Property Owner			
		Talked to Property Owner			
		Follow Up Inspection Scheduled			
		Action Needed By			
		Action Taken By			
		Follow Up Inspection Scheduled			
		Failure to Comply Citation Issued			<i>Citation #:</i>
		Court Date			

NOTES: _____
