



Code Enforcement Complaint Form

Today's Date: _____ Date of Violation: _____ Time Observed: _____

Location of Complaint: _____

Owner/Occupant Name: _____

Phone Numbers: _____ Does the Owner Live at the Residence: Y / N

Nature of Complaint: _____

*Additional narrative may be written on the back of this page.

Name of Person Making Complaint: _____ Address: _____ City: _____ State: _____ Zip Code: _____ Phone: _____ E Mail: _____

Under Chapter 421.17 R.C.W., the Public Disclosure Law, you as complainant may indicate preference for disclosure of your name to inquiries from the public. Please indicate by checking appropriately the response whether or not you wish to disclose your identity regarding public inquiries into this complaint. Upon such an inquiry, a decision of disclosure will be made by the City Attorney on a case by case basis. However, if the case is filed in court, your name must be disclosed if you are to be a witness.

- You may disclose my identity upon public inquiries regarding this complaint.
- You may not disclose my identity upon public inquiries regarding this complaint without my permission.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT (RCW 91.72.085).

Complainant: _____ Date: _____

Signature

Print: _____

Printed Name

Witness: _____

Witness is Optional

