

TOWN OF ELBERTA

FORMAL COMPLAINT

AND/OR

ZONING VIOLATION

(Please Print)

DATE: _____ TIME: _____

COMPLAINANT'S NAME: _____

ADDRESS: _____

TELEPHONE #: _____

COMPLAINT REPORTED: _____

ADDRESS OF PROPERTY: _____

ADMINISTRATOR

DATE OF SUBMISSION OF FORM: _____ INITIALS: _____

DATE OF SITE REVIEW: _____

SOLUTION: _____