

VILLAGE OF AMANDA
Property Maintenance Code Violation / Inspection

Date: _____

Date Closed: _____

PERSON MAKING COMPLAINT

Complainant Name * _____ Complainant Address * _____

Complainant Phone # * _____ Complainant Email * _____

***Indicates a required field**

Offender

Offender / Owner Name: _____

Offender / Owner Address: _____

Nature of Complaint: _____

Code Enforcement Officer Review

Date: _____

Code Violations #: _____

Embedded Adobe XML Form

The file http://www.villageofamanda.com/images/PMC_Complaint_Form.pdf is an Adobe XML Form document that has been embedded in this document. Double click the pushpin to view.

