

ORDINANCE VIOLATION COMPLAINT FORM



Office of Clerk/Treasurer • 112 2nd Ave West • PO Box 356 • Lambertton, MN 56152 • (507) 752-7601

Complainant (optional): _____ Phone: _____

Address (optional): _____

Pursuant to Minn. Stat. 13.44: Reporters' names may be confidential, and if so, will not be disclosed.

Type of Complaint:

Weeds/Overgrowth

Junk/Rubbish

Vehicle

Animal

Snow/Ice

Other: _____

Location of Complaint: _____

Description of Complaint: _____

Signature of Complainant (optional): _____ Date: _____

OFFICE USE ONLY

Date Received: _____ Employee Handling Complaint: _____

Action Taken: _____

Signature: _____

Date: _____