NORWOOD TOWNSHIP ZONING
ZONING / CODE ENFORCEMENT COMPLAINT FORM

SUBJECT OF COMPLAINT (Person or Property complaint is about)

Name ____________________________________________________________
Address ______________________________________________________________________
Phone ______________________ Tax Parcel Number: 15-011- __ __ - __ __ - __
Nearest Intersection _________________________________________________________
Nature of Complaint ______________________________________________________________________

COMPLAINANT (Person submitting complaint)

Note: Anonymous Complaints will not be accepted

Date of submittal ____________________________________________________________
Name ______________________________________________________________________
Address ______________________________________________________________________
Phone ______________________  Email address ______________________________________

Do not write below this line. For staff use only.

Complaint Number: C2010 - __ __  Staff Member Taking Complaint ____________________
Zoning Designation (Circle one):     AG     Commerical     R-1     RR     Industrial
Alleged Code(s) Violated / Comments _____________________________________________
__________________________________________________________________________
__________________________________________________________________________

Forwarded to (note date):

Twp Attorney_________ Chx. Co. Sheriff _____________ Animal Control ___________
Twp Board___________ Chx. Co. Bldg Dept. ___________ Other _________________

INITIAL INSPECTION

Inspection By:   Date:
Was Site in Violation? What Code(s)
Notice Mailed? Date:
Notice Posted at Site? Date:

FOLLOW-UP INSPECTION & ACTION

Was Compliance Reached? Date
Action taken by Township
Comments

Send to: Frank Hamilton, Norwood Township Deputy Zoning Administrator
P.O. Box 113, Charlevoix, MI 49720
Cell Phone: 231-675-5440