

City of Red Bluff COMPLAINT FORM



PLEASE PROVIDE THE FOLLOWING INFORMATION - PRINT CLEARLY AND COMPLETE THE ENTIRE FORM

DATE: _____

ADDRESS AND/OR PERSON OF SUBJECT VIOLATION: _____

PROPERTY OWNER/ TENANT:

PERSON MAKING COMPLAINT:

Name

Name

Address

Address

Phone

Phone

PLEASE LIST SPECIFIC COMPLAINTS IN SPACE BELOW AND ON REVERSE SIDE OF PAGE IF ADDITIONAL SPACE IS NEEDED

PLEASE SIGN AND DATE BELOW:

PRINT NAME: _____

DATE: _____

SIGNATURE: _____

FOR OFFICE USE ONLY :

RECEIVED BY: _____

DATE: _____