

Of Community Development

Room 204 Courthouse
201 N.. Jefferson St.
Huntington IN 46750
Ph: (260) 358-4836 Fax 260-355-2313
www.huntington.in.us/county

UNSAFE/ZONING COMPLAINT FORM

Complaint Type: Unsafe Zoning

Property address: (in violation) _____

Tax ID. # 35-____ - ____ - ____ - ____ . ____ - ____

Property Owners

Name: _____

Property Owners Mailing

Address: _____

Nature of Complaint: (brief description of issue)

Complete back side of page. If form is not complete follow up may be delayed or not completed .

Complainant Information:

Name: _____

Address: _____

Phone : (where you can be reached during daytime) _____

Do you request a follow up phone call? Yes No

Please understand all unsafe/zoning complaints filed with the Department of Community Development are public record and may be accessed by general public.

Complaint's signature

Date

DEPARTMENT USE ONLY

Site inspection date: _____

Determination of Violation: _____

Date Notice Sent: _____

Completion of request: _____

Staff Member Name: _____