PLANNING AND CODE ENFORCEMENT CITIZEN COMPLAINT FORM TOWN OF SCARBOROUGH, MAINE

For Office Use Only
Date Received:
Received By:
Map/Lot

TYPE OF COMPLAINT: (please circle)	Zoning	Land Use	Building Code	Erosion / Environmental
Complainant Information				
Date:				
Name:				
Addresse				
Address:				
Phone:				
Email:				
Complaint				
Name of Alleged Violator				
Property Address/Location				
Nature of Complaint				

Photos attached	YES	OR	NO				
I hereby affirm that the inform	mation prov	vided is	true to th	e best of my	knowledge.		
Complainant Signature						Date	
FOR CODE ENFORCEM	ENT USE	ONL	Y				

CEO Remarks, Inspection Notes, Action Take

CEO Signature