

Zoning Complaint Form

Complaint # _____

Date _____

Statement by Complainant:

It is my belief that the property located at

and being used by _____

may be in violation of the Watertown Zoning Ordinance as follows:

Complainant: _____

Address: _____

Phone: _____

Staff Action:

A. Inspection of the premises indicates:

_____ No violation of the provisions of the Zoning Ordinance

_____ Violations of the Zoning Ordinance sections(s)

Date of Inspection: _____

Inspectors Notes _____

B: Resolution: _____

Date Closed: _____

Investingating Staff: _____