## COMPLAINT FORM

Date/Time:			
Report Taken By:			
Tax Parcel Number:	Section:	Block:	Lot:
	COMPL	AINT OF VIOLATIO	N
Form of Complaint:	☐ Telephone	☐ Letter (attach)	☐ In Person
Complainant:			
Address:			
Nature of Complaint:			
			T:
Possible violation of a	article	, Section	, Subsection of the
Village of Lakewood			Law
New York State Code: section		, subsectio	n
Site Inspection completed on		(date) at	(time) [am/pm]
Report of Findings: _			
Recommended Action	1:		

Code Enforcement Officer