VILLAGE OF WINNEBAGO BUILDING AND ZONING COMPLAINT REPORT

Received by:	Date:
Complaintant Name:	
Address:	
Phone #	
Nature of Complaint:	
Location/Address:	
Owner of Property/Person Respon	sible:
Address:	
How would you like this complaint	to be addressed?
Signature	Date

FOR OFFICE USE ONLY

Complaint Referre	ed to:	
Building	Planning & Zoning	Other
	ert (This section must contain all pergation and/or interrogation, codes of	
Conclusions (by In-	vestigator):	
Recommendations	(by Investigator):	
Follow Up:		
		Date:
Results:		
Case Closed	Case Pending	
Signatur		Date