

## Zoning Ordinance – Violation Complaint Form

Today's Date: \_\_\_\_\_ Date(s) Violation Observed: \_\_\_\_\_

**NON-COMPLIANT PROPERTY ADDRESS INFORMATION** (Provide all known information)

Owner/Occupant Name \_\_\_\_\_

Owner/Occupant Home Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Property Address: \_\_\_\_\_

**COMPLAINT FILED BY**

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**TYPE OF OCCUPANCY**

Residential                       Commercial                       Agricultural                       Industrial

**PROBLEM DESCRIPTION** (specific and detailed)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I certify that I am a resident of McKenzie County and all the information provided herein is true and that by signing this form, all the information contained in this document, including your name, becomes part of the public record that McKenzie County, may be compelled by legal means to release at the time of court proceedings.

Citizen's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

<p><b>OFFICE USE ONLY</b></p> <p>Investigation Complete: <input type="checkbox"/>                      Citizen Informed of Result: <input type="checkbox"/></p> <p>Ordinance of Violation Section: _____ County Official Initials: _____ Date: _____</p>
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