

ELIZABETHVILLE BOROUGH

P.O. Box 578 Elizabethtown, PA 17023 (717) 362-7945

Complaint Form

All requested information on this form must be complete and legible.

Complainant Information:

Name: _____ Address: _____

Daytime Phone: _____ Email Address: _____

Is the issue outlined within this complaint visible from a public street or area? Yes No

If no, I hereby give the Borough's authorized agent permission to enter upon my property to investigate this complaint.

Complainant's Signature

Complainant's Printed Name

Date

Complaint Information: (use separate sheet if necessary)

Address of Complaint: _____

Location of Issue on Property: _____

Date/time issue(s) started: _____ Is the issue currently ongoing? Yes No

Description of complaint:

Automobile information (if applicable): _____
Color Make Model License #

Complainant's Signature

Complainant's Printed Name

Date

FOR BOROUGH USE ONLY:

Property Owner Information

Owner's Name: _____ Owner's Phone: _____

Owner's Mailing Address: _____

Received by: _____ Date Received: _____

Sent to: Code Officer Building Code Official Highway Dept

Date Sent: ____/____/____

Via: Email In Person