BLIGHT ORDINANCE COMPLAINT FORM – VILLAGE OF BEAR LAKE

Name of Person making Complaint	•		
Address:	(0)		
Telephone #: (H)	(C)		
Location of			
Complaint:			
Description of			
Complaint:			
Signature:			
Signature.		Date	
Date Received:	Inspection Date:		
Property Owner's Name:			
Property Owner's Mailing Address:			
Property Owner's Telephone #:			
Results of Investigation:			
DI CHD.			
Phone Call Date: No Action Necessary:	9		
Citation:			
Signature of Investigating Official:			
Date:			