



# SHAWNEE COUNTY PLANNING DEPARTMENT Zoning Violation Complaint Form

Date Received \_\_\_\_\_

## NATURE OF COMPLAINT

- Building without a permit (Type of Structure) \_\_\_\_\_
- Dumping \_\_\_\_\_
- Running A Business \_\_\_\_\_
- Other \_\_\_\_\_
- Junk/Unregistered/Inoperable Vehicles (Refer to Health Agency-Environmental Health Division)
- Weeds/Tall Grass (Refer to Noxious Weeds Department)

## GENERAL INFORMATION OF POSSIBLE VIOLATION

General Location: \_\_\_\_\_

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

Owner/Occupant: \_\_\_\_\_

## COMPLAINANT'S INFORMATION

Complainant: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City, ST, Zip: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Remain Anonymous?  Yes  No

### ZONING ENFORCEMENT OFFICER VERIFICATION

Owner: \_\_\_\_\_ S-T-R \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Zoning: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Township: \_\_\_\_\_

Appraiser PID# \_\_\_\_\_

Lot: \_\_\_\_\_ Subdivision \_\_\_\_\_

Inspection Date: \_\_\_\_\_ Violation Exists?  Yes  No Violation # \_\_\_\_\_

Remarks: \_\_\_\_\_