



# Nuisance Code Violation Form

<b>Type of Violation:</b>	
<b>Code Section/Title:</b>	
<b>Date Received:</b>	

## Property Information

<b>Address:</b>	
<b>Property Owner:</b>	
<b>Address (if different from above):</b>	
<b>Phone (if available):</b>	

## Complainant Information

<b>Name:</b>	
<b>Address:</b>	
<b>Phone:</b>	

## Comments

<b>Complainant comments:</b>	
<b>Staff Comments:</b>	
<b>CSO Comments:</b>	

## Inspection/Abatement Information

<b>Inspection Date:</b>	
<b>No violation found:</b>	<input type="checkbox"/>
<b>Abatement Deadline:</b>	
<b>Date Abated:</b>	<b>By:</b> <input type="checkbox"/> <b>Owner</b> <input type="checkbox"/> <b>City</b>