

HOOPER CITY

ORDINANCE COMPLAINT INFORMATION

Date Reported _____
Name of Complainant _____ Phone _____
Received By _____
Address of Occurrence _____
Nature of Complaint _____

↓ THIS SPACE IS FOR ORDINANCE ENFORCEMENT ONLY ↓

ACTION / DATE _____

ORDINANCE # _____ CITATION: Y / N _____ # _____

FINAL DISPOSTION & DATE _____

ORDINANCE OFFICER _____