

**HOPE TOWNSHIP
ORDINANCE/CODE VIOLATION**

COMPLAINT

DATE _____

ADDRESS OF ALLEGED VIOLATION _____

PARCEL NUMBER _____

PROPERTY OWNER: _____

ADDRESS (if other than above): _____

ALLEGED VIOLATION: _____

COMPLAINANT:

NAME: _____

ADDRESS: _____

PHONE: _____

(YES) (NO) I WISH MY COMPLAINT TO REMAIN CONFIDENTIAL.

SIGNATURE: _____

COMMENTS: _____

