

Ellsworth Township Zoning Department
Box #133
Ellsworth, OH 44416
330 538-9555

COMPLAINT FORM

Date _____ Number _____
(Office use only)

This is a public record. Any information you submit on this form is available for public review.

ADDRESS AT WHICH PROBLEM EXISTS:

Person making complaint _____

Address _____ City _____ Zip _____

Phone number _____

Party causing complaint _____

Address _____ City _____ Zip _____

Phone number _____

State complaint here:

Use other side if more space is needed.

Signature of complainant