

Complaint No. _____

Date Enforcement officer received complaint: _____

Owner Name: _____

Owner Mailing Address: _____

Property Tax ID: _____

Property Address: _____

Date of initial inspection: _____ **Pictures/Video taken:** Yes ___ No ___

Inspection comments/recommendations: _____

Letter mailed: Yes ___ No ___ **If yes, date mailed:** _____

Follow up date: _____

Follow up comments/recommendations: _____

Ticket issued: Yes ___ No ___ **If yes, date mailed:** _____

Court date/time: _____ **Court Decision:** _____

Additional comments/follow up: _____

Date closed: _____ **Final comments:** _____
