

## Code Enforcement COMPLAINT FORM

Violator's Name:	Phon	e:	
Person registering compl	aint please provide informa	tion below:	
Complainant to remain	anonymous: Yes No _		
Name:	Phone:		
Address:			
Comment/ Describe Pro	blem:		
	Check Block Below	FirstComplaint: Ye	s No
<u> </u>	<u> </u>	Previous Complaints: Ye	
Animal / Fowl	Odor Noise		
High Grass / Weeds	Derelict Vehicle(s) _		
_	_ Dog Tethering	Unfit Structure	
Trash / Junk /Debris			

TO FILE A COMPLAINT: PLEASE FILL OUT THIS FORM CLEARLY AND COMPLETELY AND RETURN IT TO THE POLICE DEPARTMENT AT THE ADDRESS SHOWN BELOW OR TO PORT WENTWORTH CITY HALL, 305 SOUTH COASTAL HIGHWAY.

NOTE: THIS FORM MUST ALSO BE SUBMITTED TO CHIEF OF POLICE FOR ASSIGNMENT.

Lieutenant Tom Chamberlain Port Wentworth Police Department 323 Cantyre Street Port Wentworth, Georgia 31407

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