



**CITY OF COTTONWOOD**

**VIOLATION/HAZARD COMPLAINT FORM**

DATE: \_\_\_\_\_ TIME: \_\_\_\_\_  
TAKEN BY: \_\_\_\_\_

REPORTING PERSON'S NAME \_\_\_\_\_ PHONE: \_\_\_\_\_

REPORTING PERSON'S ADDRESS \_\_\_\_\_

ADDRESS OF VIOLATION: \_\_\_\_\_

DESCRIPTION OF VIOLATION (*Be specific-make, model, color of car; type of trash-food waste, furniture; etc.*)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ASSIGNED TO: \_\_\_\_\_ DATE: \_\_\_\_\_



**ZONING INSPECTOR'S REPORT**

\_\_\_\_\_  
*Inspector's Name*

\_\_\_\_\_  
*Inspection Date*

ZONING INSPECTOR'S COMMENTS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Names, Addresses, Phone Numbers of person (s) contacted (if any)

\_\_\_\_\_  
\_\_\_\_\_

EVALUATION:      \_\_\_\_1<sup>ST</sup> Degree (major)      \_\_\_\_2<sup>nd</sup> Degree (medium)      \_\_\_\_3<sup>rd</sup> Degree (minor)

ACTION REQUIRED: \_\_\_\_\_ ASSIGNED TO: \_\_\_\_\_

Attachments:    \_\_\_\_ Pictures      Other \_\_\_\_\_