ZONING COMPLAINT FORM

So complaints can be handled efficiently, you must complete and sign this form. Please return the form to the BEAVER TOWNSHIP DIVISION OF ZONING. This document constitutes a "public record" pursuant to O.R.C. 149.43 (A)(1) "Availability of public records for inspection and copying" and is thereby available for public inspection.

Name, address and phone number of Person complaint is against:

Address where violation exists:

List Complaint (use other side if more space is needed):

Name, address and phone number of Person making complaint:

Signature_________________________ Date_________________________

ANONYMOUS OR UNSIGNED COMPLAINTS WILL NOT BE INVESTIGATED