

WHEATLAND POLICE DEPARTMENT 207 Main Street, Wheatland, CA 95692 TEL: (530) 633-2821 FAX: (530) 633-4033

CODE ENFORCEMENT COMPLAINT FORM

It is the intent of the Police Department's Code Enforcement Division to resolve a complaint and/or achieve voluntary compliance in a timely manner. Staffing resources may not allow on-site investigation of all complaints. The property owner is ultimately responsible for bringing the property into compliance as per zoning, building, health and safety, and related codes, regulations and ordinances. In instances of disputes between tenants and landlords, this department encourages tenants to contact landlords/property owners in writing an allow a reasonable time for resolution prior to filing this complaint. All complaints **MUST** be filled out completely **AND SIGNED** by the complainant.

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Street Address.		Ariv.	
Additional location informatio	n:		
Name of Property Owner:		Phone Number:	
Property mailing address:			
Reporting Party Information (REQUIRED)		
Reporting Party Name:		Phone Number:	
Mailing Address:			
Physical Address if different:			
Nature of Complaint (please be specific in describing what the complaint is about)			
Signature of Reporting Party R			
(identity of reporting party is considered confidential): Date:			
For Official Use Only:			
Received By:	Date Received:	Time:	
Referred to:			
Investigated By:	Date Inspected:		
Closed Date:			

Violation Location and Property Owner

Stroot Addross: