



CITIZEN COMPLAINT FORM

Date: _____

Complainants Name: _____

Complainants Address: _____

Contact Phone Number: _____

Location of Violation (address):

Directions to the Site:

Nature of Violation:

Inspector: _____ Inspection Date: _____

Inspection Results & Remedies:

Please return the completed complaint form to Shawn Wood or Anna Cherry, Code Enforcement Officers, in Room G103 of the Historic Currituck Courthouse.