

ESTABLISHED 1835



# Code Enforcement Request Form

- 18027 Old US 12 • Chelsea, MI 48118 • (734)475-8890 • FAX (734)475-8905
- www.sylvan-township.org

Staff Use Only	Property Address:
Code Enforcement Number:	Application Date:

This form must be completed for all filings of code related complaints. All complaints should be made in writing and filed with the Sylvan Township Zoning Administrator. The person or persons filing this complaint shall understand that by signing and/or attesting to the information contained herein may be asked and/or summoned by subpoena to provide testimony on this complaint, if necessary.

1. Name of complainant \_\_\_\_\_
2. Address \_\_\_\_\_
3. Telephone (home/cell) \_\_\_\_\_
4. Property address where alleged violation exists \_\_\_\_\_
5. Owner of property where alleged violation exists \_\_\_\_\_
6. Description of the alleged violation (times, dates and pictures of the alleged violation may be helpful if necessary)
   
\_\_\_\_\_
   
\_\_\_\_\_
   
\_\_\_\_\_

**Please sign here that you agree that this complaint described above is true and accurate to the best of your knowledge:**

**Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_