



Derelict Building Resident Complaint Form

Please note the City may but is not obligated to act unless 5 citizens sign this Complaint Form

Name and Address of Complainant _____
Phone number and/or email _____

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Address of Blighted or Derelict Property _____
Date Problem Began _____

Description of Problem *(In the space below provide a detailed description of the problem. Include photos if they can be obtained from the public right of way. Use additional sheets if necessary.)*

Signatures _____
