

INTAKE DATE	
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TOWN OF MILLINOCKET
Department of Planning and Code Administration
CITIZEN COMPLAINT INTAKE FORM

FORM OF COMPLAINT	
<input type="checkbox"/> Phone <input type="checkbox"/> Letter (attach) <input type="checkbox"/> Public Official _____ (name)	
<input type="checkbox"/> Citizen	
Postal Address	
Telephone	

PROPERTY INVOLVED		
Map		Lot
Postal Address		

NATURE OF COMPLAINT	
General Description	
Probable Code Violation	Section Section

FOLLOW-UP ACTION		
DATE	ACTION	INITIALS
	"No Violation" Letter Sent	
	Initial Follow-Up Letter Sent	
	Final Follow-Up Letter Sent	