

# Dubois County Indiana Complaint Form

## **Section 1: Location of Reported Violation**

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

Property address: \_\_\_\_\_

Visible from the public right-of-way? **Y N**

City: \_\_\_\_\_

Directions to property/nearest crossroads: \_\_\_\_\_

Type of Property: Owner/Occupied \_\_\_\_\_ Rental \_\_\_\_\_ Abandoned \_\_\_\_\_ Lot/Field \_\_\_\_\_

Property Owner: \_\_\_\_\_

Name of Renter: \_\_\_\_\_

Owner Address (if different than above): \_\_\_\_\_

City, State: \_\_\_\_\_

## **Section 2: Type of Complaint**

Grass/weeds in excess of 12" (Highway Dept.)

Accumulation of junk or trash (Solid Waste District)

Vector (Health Dept.)

Abandoned/junk vehicle(s) (Solid Waste District)

Septic (Health Dept.)

Air (Health Dept.)

Housing (Health Dept.)

Other (please explain): \_\_\_\_\_

Water (Health Dept.)

Specific location of alleged violation: \_\_\_\_\_

## **Section 3: Complainant Information\***

\*anonymous reports will not be accepted.

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email address: \_\_\_\_\_

Permission to enter your property to view alleged violation? **Y N**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **Section 4: Attach any photos of the alleged violation** (optional)

Please email, mail or drop off the completed report form to the Dubois County Highway Department (weeds), the Dubois County Solid Waste Management District office (vehicles/junk/trash), the Dubois County Health Department (all other complaints) or the Auditor's office.

Office use only: Date received in office: \_\_\_\_\_

form updated: 5/24/19 cjs