

## ZONING VIOLATION COMPLAINT FORM

	By signing this form the Oronoko Township Zoning Administrator is given permission to enter your property for purposes of inspection of your written complaint against your neighbor listed above.  Name:
may be in violation of the Oronoko Cha	
Complainant:	
Address:	retry located at [address]
Phone: ( )	
• • •	
Name:	Signature:
Action of Zoning Administrator	
	dicates:
· ·	· · · · · · · · · · · · · · · · · · ·
B. Inspection of premises indicates:	
	C 1
Date(s) of inspection:	
C. Action of complaint:	
	no violation was found.
□Action taken as follows:	
Zaning Administrator / Dishard Vubsal	h Data:
Zonnig Aummistrator / Kicharu Kubsci	11 Date