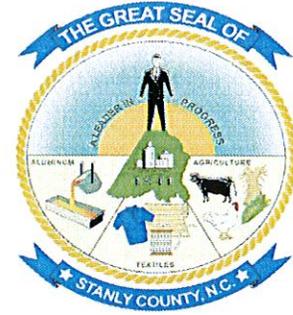


# STANLY COUNTY CODE COMPLAINT FORM – MINIMUM HOUSING/GRASS



## REQUEST FOR INVESTIGATION OF POSSIBLE HOUSING CODE VIOLATIONS

### Person/s Requesting Investigation of Possible Violation:

Per ordinance, completion of at least one of the blocks (1-3) below shall be completed before being submitted to the Code Enforcement Officer for possible inspection.

1. Signature of a County Official (Fire Marshall, Health Director, Director Building Inspection, Planning Director).

• \_\_\_\_\_  
*(Name)* *(Title)*

2. Signature of Housing Enforcement Officer

• \_\_\_\_\_

3. Signature of at least 5 residents of Stanly County that do not live in the same home.

Name,	Address,	Phone number	Signature
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• \_\_\_\_\_

• \_\_\_\_\_

• \_\_\_\_\_

• \_\_\_\_\_

• \_\_\_\_\_

• \_\_\_\_\_

### Location of Alleged Violation:

Address of complaint: \_\_\_\_\_ Tax Record #: \_\_\_\_\_

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

### Please Describe the Alleged Violation:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*(Use back of sheet for additional comments)*

DATE: \_\_\_\_\_ Time: \_\_\_\_\_ Person Taking Complaint Form: \_\_\_\_\_

Date Received: \_\_\_\_\_ Inspector Assigned: \_\_\_\_\_

Date Inspected: \_\_\_\_\_ Completed by: \_\_\_\_\_

Code Case #: \_\_\_\_\_ Completion date: \_\_\_\_\_