

IRA TOWNSHIP

Building/Code Enforcement Department 7085 Meldrum Fair Haven, MI 48023

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Email: codeenforcer@iratownship.org buildingofficial@iratownship.org

COMPLAINT FORM

Date of Complaint:	
Location of Complaint: (MUST H	(AVE AN ADDRESS)
Nature of Complaint and Sec. of C	Ordinance:
PLEASE NOTE : Ira Township hand signed.	as an established policy that all complaints must be in writing
In case of court action, are you	willing to be a witness? Yes { } No { }
The information that I have provide	ded is true and correct to the best of my knowledge.
Complainant's Name (please print	t):
Complainant's Address:	
Complainant's Telephone:	
Complainant's Signature:	
OFFICE USE ONLY	
Date Received:	Received By:
Complaint#	Assigned To:

STATUS REPORT COMMENTS ON COMPLAINT