

COMPLAINT CASE # _____

Town of East Windsor Complaint Routing Form

STREET ADDRESS OF PROPERTY: _____

NATURE OF COMPLAINT: _____

STAFF TO BE INVOLVED TO ASSESS PROPERTY MAINTENANCE COMPLAINT:

	YES	NO
_____ BUILDING OFFICIAL	<input type="checkbox"/>	<input type="checkbox"/>
_____ NCHD	<input type="checkbox"/>	<input type="checkbox"/>
_____ ZONING/WETLAND AGENT	<input type="checkbox"/>	<input type="checkbox"/>
_____ POLICE DEPARTMENT	<input type="checkbox"/>	<input type="checkbox"/>
_____ DPW/TREE WARDEN/TOWN ENGINEER	<input type="checkbox"/>	<input type="checkbox"/>
_____ FIRE MARSHAL	<input type="checkbox"/>	<input type="checkbox"/>
_____ WPCA	<input type="checkbox"/>	<input type="checkbox"/>

DATE COMPLAINT FORWARDED _____

DATED COMPLAINT REVIEWED _____

ACTION TO BE TAKEN BY: LIST DEPARTMENT INVOLVED:

COMPLAINT CASE # _____

Town of East Windsor Property Maintenance Complaint Form

1. Street Address of Property, SUBJECT OF COMPLAINT _____

2. Describe the COMPLAINT:

3. Is the property a rental? Yes No Don't Know

4. Any other comments that you would like to make? _____

CONTACT INFORMATION (Person Submitting Complaint)

Name: _____
Address: _____
Telephone #: _____
Email: _____
Signature: _____

(Signed complaints will receive priority over anonymous complaints)

Office Use Only:

DATE RECEIVED: _____

DEPARTMENT RECEIVED BY: _____