



Nuisance Complaint

Anonymous complaints cannot be investigated by this department.

All complaints are public record

PLEASE PRINT

Date: _____

Your Name: _____ Your Phone Number: _____

Your Address: _____ City/State/Zip _____

Address of Property in Question: _____
(Address must be provided)

Owner of Property in Question: _____ Phone Number: _____
(if known)

Brief description of complaint: _____

470 Center Street, Bldg. 8 Chardon, Ohio 44024 440-279-1914

FOR DEPARTMENT USE BELOW THIS LINE

Complaint Number _____ Entered by: _____