

## CITY OF NAPOLEON BUILDING & ZONING DEPARTMENT

255 W. Riverview Avenue, PO Box 151, Napoleon, OH 43545 Phone: 419-592-4010 - Fax: 419-599-8393

## **NUISANCE ABATEMENT COMPLAINT FORM**

DATE: 05/22/2012		
COMPLAINANT INFORMATION:		
Your Name: Rick Miller		
Your Address: 857 Strong St.		
Your Phone Number: (419) 906-1479		
NAME OF PROPERTY OWNER(S) WHE	O IS/ARE CAUSING NUIS	ANCE:
Address (if known): 900 Strong St.		
Phone Number (if known):		
Physical Location of Property:		
What is the type of problem at the address Accumulation of junk, debris, trash  Yard waste (such as tree limbs in yard)  Interior Conditions (leaking pipes, etc.)  Vehicle(s) parked on grass, appear inoperable, in right-of-way, private property, unlicensed/abandoned  DESCRIPTION OF COMPLAINT (Please much information as possible about the prothis form if additional space is required an	Grass/Weeds are over 8" high Tree or shrub branches blockin Other  further explain your completerty you are filing a comp	ng sidewalk  aint in detail and provide as
Rick called at 12:53pm to complain of the has called before and someone did some back unless you need more information for the has called before and someone did some back unless you need more information for the has called at 12:53pm to complain of the has called before and someone did some	Weed trimming to the prop	n the yard of 900 Strong St. He perty. Rick does not need a cal
Would you like to be contacted regarding fo	ollow-up of this complaint?	Yes/No (circle one)
Jaken over phone	05/22/2012	
Complainant Signature	Date	_

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