



# Code Enforcement Complaint

This form is used to file code enforcement complaints. Please complete the information and return it for processing

**ALL SECTIONS OF THIS REPORT MUST BE COMPLETED FOR US TO PROCESS YOUR COMPLAINT. PLEASE GIVE THE FOLLOWING INFORMATION - PRINT CLEARLY AND COMPLETE THE ENTIRE FORM.**

Date:	Time:	Complaint taken by:
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Name of Complainant: _____	Phone: _____
Address: _____	

Location of Complaint
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Description of Complaint
Continued on extra sheet. __Complaint attachments (more description) (pictures)

----- For Office Use Only -----

Priority #	Case #	Occupant	Phone
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Owner	Address	Phone
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<input type="checkbox"/> Complaint Confirmed	Offender Contacted Yes No	Clean Storm Water Report Needed Yes No
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Date	<input type="checkbox"/> Cert. Mail	<input type="checkbox"/> In person	<input type="checkbox"/> Spouse	<input type="checkbox"/> Letter	<input type="checkbox"/> Phone	<input type="checkbox"/> Other
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<input type="checkbox"/> Infraction	Code Section	Code Sections
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<input type="checkbox"/> First Offense (in one year)	<input type="checkbox"/> Previous Offense #	Code Sections
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<input type="checkbox"/> Other
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Referred to:	Date:
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Code Enforcement Officer/Inspector
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RETURN THIS FORM TO:

CODE ENFORCEMENT DIVISION  
525 HENRIETTA ST.  
MARTINEZ, CA 94553-2394

Phone: (925) 372-3598  
Fax: (925) 372-0257