

# GRATZ BOROUGH

125 N. Center St. Gratz, PA 17030 (717) 365-4115

## Complaint Form

*All requested information on this form must be complete and legible.*

### Complainant Information:

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Is the issue outlined within this complaint visible from a public street or area?  Yes  No

If no, I hereby give the Borough's authorized agent permission to enter upon my property to investigate this complaint.

\_\_\_\_\_  
Complainant's Signature

\_\_\_\_\_  
Complainant's Printed Name

\_\_\_\_\_  
Date

### Complaint Information: (use separate sheet if necessary)

Address of Complaint: \_\_\_\_\_

Location of Issue on Property: \_\_\_\_\_

Date/time issue(s) started: \_\_\_\_\_ Is the issue currently ongoing?  Yes  No

Description of complaint:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Automobile information (if applicable): \_\_\_\_\_  
Color Make Model License #

\_\_\_\_\_  
Complainant's Signature

\_\_\_\_\_  
Complainant's Printed Name

\_\_\_\_\_  
Date

### Property Owner Information

Owner's Name: \_\_\_\_\_ Owner's Phone: \_\_\_\_\_

Owner's Mailing Address: \_\_\_\_\_

#### FOR BOROUGH USE ONLY:

Received by: \_\_\_\_\_ Date Received: \_\_\_\_\_

Sent to:  Zoning Officer  Building Code Officer  Highway Dept. Via:  Email  In Person

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_