# ROANE COUNTY UNSAFE STRUCTURE AND PROPERTY ENFORCEMENT ORDINANCE

## COMPLAINT FORM

**The following citizen complaint is made pursuant to the Roane County Unsafe Structure and Property Enforcement Ordinance:**

1) Name of Complaining Party:_____

2) Address of Complaining Party:_____

3) Telephone Numbers of Complaining Party: Home:_____
   Cell:_____

4) Name(s) of Offending Party (person who has violated Ordinance):
   _____

5) Address of Offending Party: _____

6) Telephone Number of Offending Party (if known): _____

7) Address of Property where violation is taking place:
   _____

8) The Complaining Party states that the offending party has violated the county ordinance in the following manner: **(Please check all that apply)**

   _____ Accumulation of Debris _____ Dilapidation

   _____ Toxic Condition _____ Fire Hazard

   _____ Other conditions which cause the dwelling or building to be unsafe, unsanitary, dangerous or detrimental to public safety and welfare described as follows:

   _____

   _____

I affirm that the conditions described above currently exist to the best of my knowledge and belief.

_____ _____

Complaining Party Signature Date Signed

Return Completed form to:

***Unsafe Structure and Property Enforcement Agency*** *200 Main Street, Spencer, WV 25276*