



# ORDINANCE VIOLATION COMPLAINT

## *City of Oronoco*

*All personal information will be kept confidential. It is used only for our records, or if we need further clarification of complaint information given. Please have all information filled out.*

*Applicant Information:*

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

*Complainant Information:*

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Describe in detail the problem / violation that has occurred:

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Have you talked with the complainant or contacted the Police Department? If so, when: \_\_\_\_\_

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***THIS SECTION FOR CITY USE ONLY***



Investigated By: \_\_\_\_\_ Date: \_\_\_\_\_

Actions / Procedures Followed:

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