

Code Compliance Unit

Government Center

891 Mountain Ranch Road

San Andreas, CA 95249-9709

Phone: (209) 754-6326

Fax: (209) 754-6328

Date Received: _____ Received By: _____ APN: _____ CC#: _____

Sup. Dist.: _____ Solid Waste Code: _____ Zoning: _____ Records Avail: Yes No

Called In Mailed In Hand Delivered Referred by County Agency

FILL OUT THE FOLLOWING FORM AS COMPLETELY AS POSSIBLE

ALLEGED VIOLATIONS: _____

ALLEGED VIOLATOR: _____

MAILING ADDRESS, IF AVAILABLE: _____

ADDRESS OF PROPERTY IN QUESTION: _____

** DESCRIBE EXISTING HEALTH & SAFETY ISSUES **

** Please provide detailed information regarding all the existing substandard Health & Safety issues presently located on this property.

NOTE: This information is confidential and will not be divulged to the public except pursuant to a court order.

STAFF WILL NOT PURSUE ENFORCEMENT UNLESS THE FOLLOWING INFORMATION IS RECEIVED – NO ANONYMOUS COMPLAINTS

Name of Complainant: _____ Phone #: _____

Full Mailing Address: _____

SIGNATURE: _____ **Date:** _____