## COMPLAINT FORM COLUMBIA CITY/WHITLEY COUNTY PLANNING & BUILDING DEPARTMENT

Date:	Time:	Complaint# _	
Owner:		Telephone#	
Address.			
PIN#		Township	Section
Nature of Complai	int:		
Tenant:			
Address:			
Telephone#			
Complainant:			
Telephone#			
Complainant Signa	ature:		
Received By:			
Letter: Ir	Person:		
Action Taken:			