TOWN OF WASHINGTON
BUILDING/UNSAFE BUILDING COMPLAINT FORM

Name:_____

Address:_____

_____

Phone:_____ **Email:**_____

Address of property being complained about:

_____

Owner's Name:_____

Nature of complaint:_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____ _____

Signature Date