

# Town of Canandaigua

## FORMAL COMPLAINT

Complainant: \_\_\_\_\_

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

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

Site Location: \_\_\_\_\_

Property Owner(s): \_\_\_\_\_

Nature of Complaint: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you discussed your concerns with your neighbor? YES NO

Attachments Included: YES NO Number of Pages Attached: \_\_\_\_\_

Complainant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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### TO BE COMPLETED BY ENFORCEMENT OFFICER:

Parcel Address: \_\_\_\_\_ Tax Map Number: \_\_\_\_\_

Violation of Article \_\_\_\_\_, Section \_\_\_\_\_, Subsection \_\_\_\_\_, of the

\_\_\_\_\_ **Land Use Regulations** \_\_\_\_\_ **New York State Fire Prevention and Building Code.**

Site inspection completed on \_\_\_\_\_(date) at \_\_\_\_\_ (time) \_\_\_\_\_ [AM/PM]

Report of Findings: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Recommended Action: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Enforcement Officer

\_\_\_\_\_  
Date