



Lindy M. Mitchell
Zoning Inspector

Beaver Township Division of Zoning

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Trustees
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ZONING COMPLAINT FORM

So complaints can be handled efficiently, you must complete and sign this form.
Please return the form to the BEAVER TOWNSHIP DIVISION OF ZONING.
This document constitutes a "public record" pursuant to O.R.C. 149.43 (A)(1) "Availability of public records for inspection and copying" and is thereby available for public inspection.

Name of Person complaint is against: _____

Address: _____

Phone number: _____

Address where violation exists: _____

List Complaint (use other side if more space is needed):

Name of Person making complaint: _____

Address and Phone number: _____

Signature

Date

**ANONYMOUS OR UNSIGNED COMPLAINTS WILL NOT BE
INVESTIGATED**