Davison Township

COMPLAINT FORM

Complaint Information The following information must be completed in order to follow-up on complaints. No personal information is given out without your consent or a FOIA.	
Date:	Time:
Name:	Address:
Phone #	Email:

Violation Information
Violation Address:
Violators Name (if known)
Details of Complaint:
Violation visible from a public street/road ☐ Yes ☐ No
Does the department have permission to enter onto your property/easement to investigate the complaint ☐ Yes ☐ No

I/we understand that this form will become a part of the file and may become Court Evidence

_____ _____

Signature Date

Davison Township Use Only:	
Received By:_____	Date Stamped:
w/complaint form 2021	