

Michael E. Nintean, Director, BO, MCP

4 South Eagleville Road  
Mansfield, Connecticut 06268  
(860) 429-3324 (Building)  
(860) 487-4440 (Housing)  
(860) 429-3388 (Fax)

## COMPLAINT FORM

|   |                  |                |     |
|---|------------------|----------------|-----|
| PROPERTY LOCATION OF COMPLAINT:         |                  |                |     |
| Name of Complainant:                    |                  |                |     |
| Contact Person(s):                      |                  |                |     |
| Street Address of Owner (No P.O. Box):  | City             | State          | Zip |
| Mailing Address: (P.O. Box Acceptable): | City             | State          | Zip |
| Telephone:                              | Alternate Phone: | Email Address: |     |

### COMPLAINT DESCRIPTION

|      |            |
|------|------------|
|      |            |
| DATE | SIGNATURE: |

Have you contacted the landlord and/or property management company: YES  NO

Date(s) of Contact: \_\_\_\_\_

### RESULTS

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|  |
|--|

**NOTE: If complaint relates to an interior issue, an executed Right of Entry form must be attached to this form when filing.**

|   |                       |
|---|-----------------------|
| <b>DO NOT WRITE BELOW – DEPARTMENT USE ONLY</b>   | <b>DATE RECEIVED</b>  |
| <p style="text-align: center;"><b>REFERRED TO:</b></p> <p>INSPECTOR: _____</p> <p>OTHER DEPARTMENT(S): _____</p> <p>_____</p> <p>_____</p> <p>_____</p> | <p>RCVD BY: _____</p> |