

# Village of Kent City

## Record of Complaint / Inquiry

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

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

Parcel #: \_\_\_\_\_

Nature of Complaint / Inquiry:

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### For Office Use Only

Property Owner: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone #: \_\_\_\_\_

Other Responsible Person: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone #: \_\_\_\_\_

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The following information to be kept confidential; Not to be placed in file.

Complaint / Inquiry Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone #: \_\_\_\_\_

Action Taken / Inspection results:

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Signature of Official

