

# Lake Township Zoning

## Alleged Violation Complaint Form

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

Your Name: \_\_\_\_\_

Your Phone Number: \_\_\_\_\_

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

Complaint Address/or Location: \_\_\_\_\_

Complaint Description:

---

---

---

- Please note: Lake Township does not accept anonymous complaints. It must be noted that this document will become public record: therefore any information offered will be provided if there is a public records request.

Your Signature: \_\_\_\_\_