

VILLAGE OF WEST HAVERSTRAW
Telephone: (845) 947-2800 Fax: (845) 947-1560
COMPLAINT/VIOLATION

Form of Complaint: Phone Letter (attached) In Person Faxed

Date of Complaint: _____

CHECK HERE IF YOU CHOOSE TO REMAIN ANONYMOUS _____

Complainant: _____

Address: _____

Phone: _____

Site Location: _____

Property Owner: _____

Tax Designation of Complaint: Section _____ Block _____ Lot _____

Nature of Complaint: _____

ACTION BY ENFORCEMENT OFFICER:

Possible Violation of Article: _____ **Section** _____ **Subsection** _____

Of the _____

Site Inspection Completed On: _____ **(AM/PM)**

Report of Findings: _____

Recommended Action: _____

Fred Viohl
Building Inspector/Fire Safety Inspector

Nick Ribaldo
Code Enforcement Officer

