



BUILDING DEPARTMENT REQUEST FOR ENFORCEMENT

Tracking Number: _____

Property address: _____

Under what Regulation:

Building Code

Chapter (s) _____

Section (s) _____

Zoning By-Law

Chapter (s) _____

Section (s) _____

Historic District

Chapter (s) _____

Section (s) _____

Sign Code

Chapter (s) _____

Section (s) _____

Details of Violation:

Check if you have continued the description on the back of this sheet.

Check if you are willing to appear in court.

Signature of Complainant _____

Print Name _____

Address _____

Phone Number _____

Email _____

If by a Board, submit signature of chairman and public hearing date.

Chair _____

Hearing Date _____

FOR OFFICE USE ONLY

Map _____ Parcel _____

Refer to: Health Department Licensing Fire Department Police Department
 Town Administrator Natural Resources Engineering