

City of Grand Mound
Complaint Form
Complaint's are public record

Complainant Information

Name: _____

Mailing Address: _____

Phone Number (optional): _____

Email Address: (optional): _____

Complaint: Please include the name if known, address, specific details of the code violation.
Supporting documentation such as photos or videos are required to substantiate the complaint or
the complaint will be marked invalid.

Name of Property Owner: _____

Address of Property: _____

Details of code violation/complaint:

Please explain how you believe this could be resolved or specific action you are requesting:

If required, will you attend a court hearing to testify to the statements on this form? Yes ___ No ___

Signature of complainant: _____ Date _____

All complaints must be signed and dated to be considered valid

(Office Use Only)

Copy given to the nuisance committee on _____

Nuisance committee responses: Mayor ___ Council Member ___ Public Works Superintendent ___

Complaint is Valid __, Corrected __, Invalid __.

Step 1: Courtesy letter sent _____ **Appeal received** _____ **Appeal results** _____

Nuisance committee responses: Mayor ___ Council Member ___ Public Works Superintendent ___

Complaint is Valid __, Corrected __, Invalid __.

Step 2: Sixty days to abate _____ **Appeal received** _____ **Appeal results** _____

Step 3: Citation issued _____ **Court Appearance on** _____ **Guilty** ___ **Not Guilty** ___ **Fines Paid** _____

Complaint Process Complete and marked: Invalid _____ Corrected _____ Citation Issued _____)