## **Zoning Department Complaint Form**

Jefferson Township 487 Cortez Road Jefferson Township, PA 18436

Complainant Informatio	n	Location of Potential Violation
Name		Address
Address		Date of Incident
City/State/ZipPhoneEmail		RETURN COMPLETED FORM TO:  Jefferson Township  487 Cortez Road
Signature DISCRIPTION OF COMP		Note: Anonymous complaints will not be processed.  additional page(s) if necessary) DATE
FOR JEFFERSON TOWN	NSHIP STAFF U	SE ONLY
Date Received		Complaint No.
Referred To:		Department:
STATUS UPDATE:		
Date	Explanation	
Date		
Date		to Complainant