

CHARTER TOWNSHIP OF BANGOR
CODE ENFORCEMENT DEPARTMENT
180 STATE PARK DR.
BAY CITY, MI 48706
989-684-5427
FAX: 989-684-5644

COMPLAINT FORM

DATE: _____ TIME: _____

*NAME OF COMPLAINANT (PRINTED): _____

SIGNATURE: _____

*ADDRESS OF COMPLAINANT: _____

*ADDRESS OF PROBLEM (OR LOCATION): _____

PHONE: _____

*COMPLAINT (DESCRIBE THE PROBLEM): _____

ACTION TAKEN (OFFICIAL USE ONLY): _____

* Indicates required information. Township Ordinance Enforcement Policy requires the name and address of the person filing the complaint. The address of the problem must also be identified; if the property has no address markings, then a detailed description will be required to properly identify the offending property. A description of the alleged violation must also be provided. **Any complaint that does not provide the required information, including complaints submitted anonymously, shall be rejected.** This form may be submitted via fax.