

BLIGHT COMPLAINT FORM

Date: _____

1. Your Name: _____

Address: _____

Telephone number: _____

Email address: _____

2. Address of property about which you are filing this complaint.

In what township is the property? _____

3. Please provide a detailed description of the condition of the property that is giving rise to your complaint. **Please see the definition of blight on page two of this complaint form.

4. How long has the property been in the condition you describe? _____

5. Do you know the name of the owner and/or occupant of the property? Please provide:

6. Have you spoken with the occupant or owner about your concerns? Who? When? In person? _____

Please describe this conversation. _____

7. Do you know if the occupant of the property possesses firearms or weapons of any kind? _____ yes _____ no

Are there dogs on the property: _____ yes _____ no

If yes to either of the above, please provide a detailed description: _____

8. How would you like to see this problem resolved? _____

Signature of Complainant

Print Name

**The following conditions *may* constitute blight:

Any parking, storage or accumulation of inoperable motor vehicles on any private property, unless that storage or accumulation is inside a completely enclosed building, or a fence made of such material as would hide said accumulation from view, or if such accumulation and/or storage is accomplished in such a manner as to conceal same from view from adjacent private or public property, including public or private roads.

To be completed by Township Supervisor

Action requested by township: _____

Supervisor Signature

Date

Print Name