

BOROUGH OF LITTLE FERRY
215-217 Liberty Street
Little Ferry, NJ 07643
201-641-9234 ext. 673

COMPLAINT LOCATION _____ BLOCK: _____ LOT: _____

REQUIRED ATTENTION: _____ IMMEDIATE: _____ SCHEDULE INSPECTION: _____

COMPLAINANT INFORMATION		
_____ WALK-IN _____ PHONE CALL _____ LETTER _____ INTER-OFFICE _____ ANONYMOUS		
RECEIVED BY – INITIALS: _____ TIME: _____ AM/PM		
Name: _____		
Address: _____		
Telephone No. Home: () Work: () Cell: ()		

COMPLAINT CLASSIFICATION		
<input type="checkbox"/> PROPERTY MAINTENANCE	<input type="checkbox"/> ZONING	<input type="checkbox"/> HEALTH
PROPERTY OWNER INFORMATION: _____		

NATURE OF COMPLAINT: _____

ACTION TAKEN

REINSPECTION DATE _____

STATUS _____
ABATED DATE _____

DISPOSITION OF COMPLAINT
<input type="checkbox"/> UNFOUNDED
<input type="checkbox"/> WRITTEN WARNING
<input type="checkbox"/> SUMMONS ISSUED
INVESTIGATOR'S INITIALS _____
DATE _____