

Incorporated Village of Upper Brookville

Building Department

P.O. Box 600, Oyster Bay, NY 11771-0600

516-624-7715 Ext. 2 Fax: (516) 624-7137

COMPLAINT FORM

Under the Village Zoning and NYS Building Code

COMPLAINT: _____

DATE: _____

NAME: _____

ADDRESS: _____

PHONE/CONTACT: _____

VIOLATION LOCATION: _____

PROPERTY OWNER: _____ **PHONE #:** _____

SECTION/BLOCK/LOT: _____

PROPERTY ADDRESS: _____

TENANT NAME: _____

NATURE OF COMPLAINT: (Please provide as much information as possible. All information is kept confidential)

VILLAGE USE ONLY:

REFERRAL from OFFICIAL

CITIZEN complaint

UNRELATED INSPECTION

ROUTINE PATROL

INSPECT & PROVIDE THE FOLLOWING:

INSP. DATE: _____ **RE-INSPECT DATE:** _____

INSPECTION OF ALLEGED VIOLATION:

PHOTOS TAKEN # _____

VIOLATION NOTICE POSTED

PERSONAL CONTACT

BUILDING INSPECTOR: _____