## Village of Upper Brookville

Building Department 24 Wolver Hollow Road, Glen Head, NY 11545 T: 516-624-7715 Ext. 3

Buildingdept@upperbrookville.org

## **COMPLAINT FORM**

Under the Village Zoning and NYS Building Code

Date:			
Name:			
Address:		_	
Phone #			
Email:			
VIOLATION LOCATION	<u>N</u>		
Property Owner:			
Contact information:			
Address:			-
Section/Block/Lot:			
Nature of Complaint: (Pleas	e provide as much information	as possible. All informatio	n is kept confidential)
Village Use Only			
☐ Referral from Official	□ Resident Complaint	☐ Unrelated Inspection	□ Routine Patrol
Inspection Date:	Re-Inspection Date	:P	hotos Taken #
Inspection of Alleged Viole	ation:		
Inspector:		□ Violation Notice Posted	□ Personal Contact