

**NORTHFIELD TOWNSHIP
BUILDING & ZONING DEPARTMENT**



ORDINANCE COMPLAINTS

Date: _____

COMPLAINT INFORMATION (Person(s) whom you are filing the complaint against)

Name: (If known): _____

Address: _____

GENERAL DESCRIPTION OF ALLEGED VIOLATION: _____

**IF YOU WISH TO LEAVE YOUR NAME AND TELEPHONE NUMBER TO BE CONTACTED
REGARDING THIS COMPLAINT. PLEASE LIST IT BELOW:**

Name: _____

Address: _____

Telephone: _____ Email: _____

Signature: _____

COMPLAINT TAKEN BY: PHONE IN PERSON BY MAIL

Person taking complaint: _____
(Name)

Complaint referred to: _____

Original to: Township Clerk

Copies to: _____

P. O. Box 576 * 8350 Main Street * Whitmore Lake, MI 48189

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