



CASE NO. _____

City of Ojai
Community Development Department

CODE COMPLIANCE COMPLAINT FORM

Your complaint will be prioritized first by health and safety.

Anonymous complaints will be responded to at the discretion of the City.

Complaints involving racial or gender discrimination will have no response.

If there is a neighborhood dispute over other matters or involving other neighbors please explain in the "Expanded Description". Disputes may be processed through mediation at the discretion of the City.

REQUESTED BY

NAME _____ DATE _____

ADDRESS _____ PHONE _____
NO. STREET

COMPLAINT / ADDRESS

LOCATION _____
NO. STREET

- | | |
|---|---|
| <input type="checkbox"/> LITTER / TRASH | <input type="checkbox"/> DUST |
| <input type="checkbox"/> JUNK | <input type="checkbox"/> ANIMALS |
| <input type="checkbox"/> INOPERATIVE VEHICLES | <input type="checkbox"/> FIRE HAZARD |
| <input type="checkbox"/> SMELL | <input type="checkbox"/> RODENTS, INSECTS |
| <input type="checkbox"/> NOISE | <input type="checkbox"/> SIGNS, BANNERS |
| <input type="checkbox"/> BUILDING CODE | <input type="checkbox"/> OTHER |

COMPLAINT DESCRIPTION _____

For staff use only	Received by _____ Date _____
OWNER _____	ADDRESS _____
FIELD REPORT	
<input type="checkbox"/> VIOLATION OBSERVED <input type="checkbox"/> NO VIOLATION OBSERVED	
BY _____	DATE _____