



CITY OF SCOTTS VALLEY

1 Civic Center Drive . Scotts Valley. 95066

Phone: 440-5640/Fax: 438-2793

COMPLAINT FORM

Complaint No. _____

Address/Location of Complaint:

Description of Complaint (print clearly):

Your Name (complainant): _____ Date: _____

Address: _____ Phone: _____

Email Address: _____

FOR OFFICE USE ONLY

Planning Dept. Building Dept. Police Dept. Public Works

Fire District Other _____

Assessor's Parcel No. _____

Property Owner's Name: _____

Property Owner's Address: _____

