

## INITIAL COMPLAINT FORM CODE ENFORCEMENT VIOLATION

Full Nan	ne of Compla	inant <sup>1</sup> :				-
Address	<u> </u>					-
		on Received:				
Visual O		Report by City I				_
	Departm	ent:				-
Physical	Address of I	nfraction:				-
Weeds	Garbage	Dumpster	Rubbish	Vehicle	Snow	
	owner/Land	llord	Renter			

<sup>&</sup>lt;sup>1</sup> Pursuant to Minn. Stat. 13.44 all reporters' names are confidential and cannot be disclosed.