MUNICIPALITY OF NORRISTOWN
CODE ENFORCEMENT DEPARTMENT
235 EAST AIRY STREET
NORRISTOWN, PA. 19401
610-270-0441

COMPLAINT INVESTIGATION FORM

COMPLAINANT INFORMATION

Name: _____

Address: _____

City/State/Zip: _____

Telephone_____

Sent/Delivered by

( ) Mail

( ) In Person

Signature_____ **Date**_____

VIOLATING PROPERTY/ADDRESS

Building Owner/Occupant (if known): _____

Location/Address of Violation: _____

_____

DESCRIPTION OF THE ALLEGED VIOLATION

_____

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