

Vevay Twp. Complaint Log

Violation Address:

Violation #20 -

Date Received:

Complainant's name: _____

Complainant (address, e-mail, phone): _____

____ Grass

____ Trash

____ Disabled/unlicensed vehicle(s)

____ Sign(s)

____ Zoning (sheds, fences, etc.)

____ Other

Where on property does violation exist? _____

If unable to see from road affronting property, do we have permission to enter complainant's Property to view violation?