

ZONING VIOLATION COMPLAINT FORM



PLANNING and ZONING DEPARTMENT
7 Fan Hill Road, Monroe, CT 06468
Tel. (203) 452-2812 – jchapman@monroect.org
Joseph Chapman – Zoning Enforcement Officer

Property Address of Alleged Violation: _____

Assessor Tax Map # _____ Lot # _____ Zone: _____

Property Owner (if known) _____

Description of Alleged Violation: _____ *If including Attachments and/or Pictures, check here*

All complaints are a matter of public record and subject to the Freedom of Information Act

Complainant Name: _____ Email: _____

Complainant Address: _____ Phone: _____

(optional – anonymous complaints will be prioritized and investigated at staff discretion depending on severity or public safety)

OFFICE USE:

Date of Investigation: _____ Follow-up Investigations: _____

Inspection Findings: Action Taken No Violation Found Undetermined Based on Available Information

Referrals: Inland Wetlands Health Dept Building Dept Public Works Police Fire First Selectman