ZONING COMPLAINT

CONFIDENTIAL

Complainant Name: _____ Date: _____

Complainant Address: _____ Phone Number: _____

Location/Address of Alleged Violation: _____

Owner of Property: _____

Summary of Complaint:

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Complainant Signature: _____

Return to Sugarcreek Borough, 212 Fox Street, Franklin, PA 16323
Attn: Larry Moyer, Zoning Officer

Received By: _____ Date Received: _____
(Name/Title)