



# Town of Littleton

## OFFICE OF CODE ENFORCEMENT

### Citizen Complaint Report

PERSON FILING COMPLAINT	COMPLAINT FILED AGAINST
Name: _____	Name: _____
Address: _____	Address: _____
Telephone: _____	Telephone: _____
e-mail: _____	e-mail: _____
Address of Complaint: _____	_____
(Street)	(Tax Map & Lot Number)
COMPLAINT: _____	
_____	
_____	
_____	
_____	
_____	
_____	
_____	
_____	
Complainant Signature: _____	
<i>Office Use Only</i>	
Received Date: _____	Received by: _____
Time: _____	Referred to: _____
Action Taken: _____	
_____	
_____	
_____	
Complainant Notified of Action: By: Telephone _____ e-mail _____ In Writing _____	
Date: _____ By (Staff Member): _____	