

WASHINGTON TOWNSHIP

7951 Center Street

Emerald PA 18080

610-767-8108 fax 610-767-0635



COMPLAINT FORM

Complainant's Name: _____ Phone # _____

Address: _____

Nature of Complaint: _____

Alleged Violator's Name: _____

Address or Location: _____

Complainant's Signature: _____ Date: _____

Inspected By: _____ Date: _____ Time: _____

Comments: _____

Action Taken: _____

