

**CITY OF WINFIELD
ZONING VIOLATION COMPLAINT**

Date of Complaint: _____

Complaint received by: _____

Form of Complaint: _____ Citizen _____ Public Official _____ Inspector

Name of Person Filing Complaint: _____

Telephone No.: _____

Nature of Complaint: _____

Location: _____

Probable violation of Section _____, of the Zoning Ordinance of Winfield, described as follows: _____

Referred for inspection to: _____

Date of Inspection: _____

Inspection findings: _____

_____ Violation found _____ No violation found _____ Other

Initial action following discovery of violation: _____

_____ Notice of Zoning Violation sent on: _____

_____ Other

Follow-up inspection due on: _____

Notes: _____