

WASHINGTON TOWNSHIP
VAN WERT COUNTY

COMPLAINANT FORM

Name of applicant- _____
Address- _____
State, City, Zip- _____
Phone Number- _____

Address of complaint: _____
Name of Resident: _____
Phone Number: _____

Reason for complaint: _____

Signature of Complainant: _____
Date: _____

Complaint form must be filled out completely, names, addresses, phone numbers and a reasonable complaint must be filed pertaining to local zoning codes or Township business. If the complaint form is not accurate in it's complaint or is considered by the Township trustees to not to be a zoning matter, or a matter not the responsibility of the Township, the applicant will be advised to seek legal council and will be considered a civil matter.

Date received: _____