CITY OF HAMMOND

CODE ENFORCEMENT DEPARTMENT

Bobby Mitchell, Code Enforcement Officer 219 East Robert Street • HAMMOND, LA 70401 Phone (985)277-5646 • FAX (985)277-5638

COMPLAINT FORM

(Please circle violation): Grass	Trash Demoli	tion Vehicle Sig	gn / Ot	<u>her</u>				
DATE OF COMPLAINT								
Violation Location / Address								
Location Description								
Property Owner (if known)								
COMPLAINT / COMMENT								
Complainant Name								
Address								
Phone #								
Signature (Optional)								
OFFICE USE ONLY								
DATE RECEIVED								
INVESTIGATION DATE		INSPECT	ED BY					
Parcel Address		·						
Parcel #								
Assessment #								
Owner's Mailing Address								
Owner's Phone #		Council D	District:	1 2	2	3	4	5
Before photo taken	Yes / No	Date of	f Photo					
Follow up photo taken	Yes / No	Date of	f Photo					
Complete photo taken	Yes / No	Date of	f Photo					
Is this a valid complaint	Yes / No							
If no, state reason								
How Was Notice / Citation Served	□Hand Delivered	□Mailed □Newsp	aper [□Left a	t Do	or	□Ot	her
					_			