

City of Cascade Locks Ordinance Enforcement Complaint Form

Address/Location of Possible Violation: _____

City: Cascade Locks State: Oregon Zip: 97014

Type of Complaint (circle): Discarded Vehicle/Debris/Stagnant Water/Water Pollution/Odor/Surface Drainage
Creating a Hazard/Attractive Nuisance/Snow and Ice/Defective Sidewalks/ Fences along Sidewalk
Trees, Brush, Grass, Weeds/Junk/Radio or TV Interference/Noise/Traffic/Skateboarding/Animal Control
City Utilities/Zoning/Dangerous Buildings/OTHER _____

Details of Complaint:

Resident Name(s): _____

Owner Name(s) if different than resident: _____

Address: _____

City: _____ State: _____ Zip: _____

Can the possible violation be seen from a road? YES / NO

What is the best location to inspect the site? _____

ARE THERE ANY KNOWN/SUSPECTED HAZARDS AT THE LOCATION? YES/NO/UNKNOWN

IE: dangerous animals, criminal activity, chemicals, unstable individuals

Please list details if hazard is indicated: _____

Complainant Information:

Name: _____ Phone Number: _____

Address: _____ City: _____

Is the complainant a neighbor? YES / NO

Does the complainant give permission to the OEO to use their property for viewing the violation?

YES/NO If NO, why? _____

Will you be willing to testify in court if necessary? YES / NO (Testimony may be necessary for prosecution)

If you have photos or other related information that may be used as evidence please submit them with this application. Submitted items will not be returned and will become part of the complaint file. **All efforts will be made to maintain the confidentiality of the complainant.**

Office Use Only

Date/Time Received _____

Received by _____

Date OEO Received _____

Date Investigated _____

Ordinance Violation Y / N

Ordinance _____