



City of Tombstone Building Department

P.O. Box 339 * 611 E. Allen Street
Tombstone, Arizona 85638

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Email: buildingofficial@cityoftombstoneaz.gov

CODE VIOLATION **COMPLAINT FORM**

Date: _____

Please complete the below information.

COMPLAINANT INFORMATION:

(This information will be kept anonymous.)

_____	_____	_____
Last Name	First Name	Middle Name
Mailing Address: _____		

_____	_____	_____
City	State	Zip

_____	_____	_____
1 st Contact Number	2 nd Contact Number	E-Mail Address

COMPLAINT SECTION

Name of Business or Property Owner: _____

Property Street Address: _____

Complaint: _____

What would you like to see done? _____

Signature

Date

FOR OFFICE USE ONLY

Date Received: _____

Date Inspected: _____

Inspected By: _____

Findings during inspection: _____

Actions Taken by inspector: _____

Referred to Marshal's Office on: _____

Referred to City Attorney's Office on: _____

Referred to City Mayor and City Council on: _____