

## P.O. Box 13 207 Bridge Ave. Star Prairie, WI 54026 CODE VIOLATION COMPLAINT FORM COMPLAINT FORM

	ALLEGED VIOLATOR
Property Owner:	Daytime Phone: ()
	SITE INFORMATION
Site Address:	
Property Location (if known):	
	NATURE OF COMPLAINT
	ected violation of the Village of Star Prairie Code of Ordinances — m and submit as much supporting evidence (i.e. photos, documents, of the complaint.
Please be advised that under Wi	sconsin's Public Records Law, Wis. Stats. §19.31, et al., the complaint
	available for public review upon request. Only in an exceptional case
nay access be denied.	
	Your contact information:
Vame:	Email Address:
Address:	Phone Number:
City/State/Zip:	
	OFFICE USE ONLY
Date Received:/_/	
ate received/_/	Staff Descripting Complaints
amoutar #	
Computer #:	Staff Receiving Complaint: Parcel #: Code Section(s) violated: