Zoning Department Complaint Form

Jefferson Township
487 Cortez Road
Jefferson Township, PA 18436

Complainant Information

Name _____

Address _____

City/State/Zip _____

Phone _____

Email _____

Location of Potential Violation

Address _____

Date of Incident _____

RETURN COMPLETED FORM TO:
Jefferson Township
487 Cortez Road
Jefferson Township, PA 18436
zoningofficer@jeffersontwplackawanna.gov

Note: Anonymous complaints will not be processed.

Signature _____

DISCRIPTION OF COMPLAINT (Attach additional page(s) if necessary) **DATE** _____

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

FOR JEFFERSON TOWNSHIP STAFF USE ONLY_____

Date Received _____ Complaint No. _____

Referred To: _____ Department: _____

STATUS UPDATE:

Date _____ Explanation _____

Date _____ Explanation _____

Date _____ Response sent to Complainant