



City of Stevenson

9.b(2)

(509) 427-5970

7121 E Loop Road, PO Box 371
Stevenson, Washington 98648

TO: City Administrator

DATE: _____

SUBJECT: Nuisance Complaint

COMPLAINANT CONTACT INFO (Unless anonymous) NAME: _____

Email: _____ Phone: _____

Check here if you want to have your name and contact info withheld from disclosure.

COMPLAINT SUMMARY:

Property/Properties: _____

Complaint: _____

STAFF INVESTIGATION: DATE: _____

ACTION TAKEN: DATE: _____

CONTACT WITH COMPLAINANT: Initial: _____ Date _____ Final: _____ Date _____