



CITY OF MUSTANG RIDGE
VIOLATION COMPLAINT FORM



Date: _____

COMPLAINANT:

Name: _____

Address: _____

Phone: _____ Email: _____

LOCATION OF VIOLATION:

Property Owner Name (if known): _____

Address: _____

Phone (if known): _____

VIOLATION:

- Commercial site construction
- Residential Construction Permit
- On-site sewage facility
- New / improved driveway
- Public Nuisance
- Public Health
- Junk Vehicle
- Trash/Debris/Junk
- Overgrown Grass
- Other: _____

Dumper Information: If you saw someone or know the person who illegally dumped the material, please provide the following information:

Name or description of person: _____

Date dumping observed: _____

Location: _____

Type and color of Vehicle: _____

Additional Information (i.e., Company Name, Logos, and/or any identifying marks):
