

**Polk Township - Crawford County
Office of Code Enforcement**

Galion, Ohio 44833
Tom Ray, President
419/468-3888
plrondon@hotmail.com

Code Enforcement Complaint

Please fill out Complaint Form as completely as possible

Date: _____

Complaint/Violation: _____

Owner of Property in question (if known): _____

Property Address: _____

Complainant Information

Name: _____

Mailing Address: _____

Phone #: _____

I certify that the information provided above is true to the best of my knowledge.

Signature of complainant

Printed name of complainant

*******OFFICE USE ONLY*******

Received by _____

Date _____

Zoning Inspector Signature: _____

Date _____

Action taken: _____

Follow up letter sent _____

Date sent: _____

Violation remedy: _____

Date: _____