



## ROXBURY LAND USE DEPARTMENT COMPLAINT FORM

DATE: \_\_\_\_\_

COMPLAINT BY:

COMPLAINT AGAINST:

NAME: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

PHONE: \_\_\_\_\_

SIGNED: \_\_\_\_\_

COMPLAINT:

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ACTION TAKEN:

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PENDING:

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