



## EAST COVENTRY TOWNSHIP

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### VIOLATION / COMPLAINT FORM

Date: \_\_\_\_\_

**Complainant:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: Home \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

**Property in Violation:**

Property Owner: \_\_\_\_\_

Address: \_\_\_\_\_

Parcel Number: \_\_\_\_\_

Type of Violation \_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

**Comments:**

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