City of Berea
Citizen Complaint Form

Date_____

Location of Violation: _____

Violator's Name _____

Address _____

Phone _____

Owner's Name _____

Address _____

Phone _____

Rental Yes _____ No _____

Renter's Name _____

Phone _____

____ Weeds/Grass ____ Trash/Rubbish ____ Fences ____ Dilapidated Buildings
____ Animals ____ Abandoned Vehicles ____ Swimming Pools
____ Condition of Rental Units ____ Other: _____

Summary of Complaint:

Our office handles each complaint anonymously; however, we ask that this information is provided for records or additional information concerning the complaint.

Your Name _____

Address _____

Phone _____