

Howard Township Ordinance Complaint Form

Date of Complaint: _____

Location of Complaint: parcel #14-020- _____

***Address:** _____

***Nature of Complaint:**

Property Owner: Name _____

Address: _____

Phone Number: _____

Complainant: Name _____

Address: _____

Phone Number: _____

Complaint Taken by: _____

Action Taken: _____

Signature: _____

Date: _____

- **MUST BE COMPLETED**