

# Oley Township Board of Supervisors



P.O. Box 19 • Oley, Pennsylvania 19547 • (610) 987-3423 • Fax (610) 987-9010

## COMPLAINT FORM

*This form must be filled out completely, please print. Anonymous complaints will NOT be accepted.*

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

Location of Problem (Address): \_\_\_\_\_

Describe in detail nature of complaint: (Attach photos if available)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Complainant's Name: \_\_\_\_\_

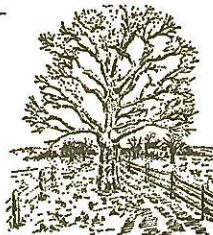
Complainant's Address: \_\_\_\_\_

Complainant's Phone Number: \_\_\_\_\_  
*(This information is necessary in order to contact you if we should require additional information.)*

I hereby certify that this information is true and correct to the best of my knowledge.

Complainant Signature: \_\_\_\_\_

May Township/Code Enforcement personnel walk on your property to view the alleged violation: \_\_\_\_\_



THE TREE IN THE MIDDLE OF THE ROAD

**FOR OFFICE USE ONLY**

Complaint Received By: \_\_\_\_\_

Date Received: \_\_\_\_\_ Time: \_\_\_\_\_

**COMPLAINT REFERRED TO:**

_____ Supervisors	_____ Code Enforcement Officer
_____ Road Department	_____ Sewage Enforcement Officer
_____ Police Department	_____ Fire Department
_____ Other _____	

**ACTION TAKEN:**

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