

**BRILEY TOWNSHIP ZONING AND/OR  
ENFORCEMENT COMPLAINT FORM**

Date of Complaint: \_\_\_\_\_

Type of Complaint: \_\_\_\_\_

Address of Complaint: \_\_\_\_\_

Owner or Occupant of Property: \_\_\_\_\_

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

Reason for Complaint: \_\_\_\_\_

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

\_\_\_\_\_  
Signature, Address and Phone Number of Complainant

-----  
**FOR BRILEY TOWNSHIP USE ONLY:**

Date of Initial Investigation: \_\_\_\_\_

Action Taken (if any): \_\_\_\_\_

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

Outcome: \_\_\_\_\_

Date Case Closed: \_\_\_\_\_

Zoning/Enforcement Officer Signature: \_\_\_\_\_