



**TOWN OF WYTHEVILLE**  
Post Office Box 533  
Wytheville, Virginia 24382  
Telephone Number: (276) 223-3339

**CODE ENFORCEMENT/CITIZEN COMPLAINT FORM**

Complainant Name \_\_\_\_\_ Call-in \_\_\_\_\_ Personal \_\_\_\_\_ Written \_\_\_\_\_  
Address \_\_\_\_\_ Telephone ( ) \_\_\_\_\_  
Received By \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_  
Describe Problem \_\_\_\_\_  
\_\_\_\_\_

Location of Problem (Address & Directions) \_\_\_\_\_  
\_\_\_\_\_

Persons Responsible (Owner/Occupant) \_\_\_\_\_  
Name \_\_\_\_\_ Address \_\_\_\_\_  
How long has problem existed? \_\_\_\_\_ Have you told the party responsible? Yes \_\_\_ No \_\_\_  
Have you or neighbors reported problem before? Yes \_\_\_\_\_ No \_\_\_\_\_  
What do you feel should be done to alleviate the problem? \_\_\_\_\_  
\_\_\_\_\_

Would you be willing to appear as a witness in court if legal action is taken? Yes \_\_\_ No \_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**(Official Use Only Below This Line)**

Pre-Investigation \_\_\_\_\_ Contact \_\_\_\_\_  
Date Investigated \_\_\_\_\_ By \_\_\_\_\_  
Remarks \_\_\_\_\_  
\_\_\_\_\_

Notice Date \_\_\_\_\_ Verbal \_\_\_ Phone \_\_\_ Letter \_\_\_ Warning Citation \_\_\_  
Period \_\_\_ Days \_\_\_ Personal Service \_\_\_ Mail \_\_\_ Reg/Cert. Mail \_\_\_ Ret. Receipt \_\_\_  
Follow-up date \_\_\_\_\_ Corrected: Yes \_\_\_ No \_\_\_  
Appeal: Yes \_\_\_ No \_\_\_ Date \_\_\_\_\_ Upheld \_\_\_ Rejected \_\_\_ Date \_\_\_\_\_  
Abatement: Yes \_\_\_ No \_\_\_ By \_\_\_\_\_ Costs \$ \_\_\_\_\_  
Other \_\_\_\_\_ Notices \_\_\_\_\_ (Explain) \_\_\_\_\_  
\_\_\_\_\_

Citation issued \_\_\_\_\_ Date \_\_\_\_\_ Court Date \_\_\_\_\_ Disposition \_\_\_\_\_  
Remarks \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FILE # \_\_\_\_\_ STREET \_\_\_\_\_ REF: \_\_\_\_\_**