



CASE # : \_\_\_\_\_

# RESIDENTS REPORT - ZONING/ROW ISSUES

RESIDENT'S NAME

TODAY'S DATE

RESIDENT'S EMAIL

RESIDENT'S PHONE NUMBER

ADDRESS IN QUESTION

DESCRIPTION OF ISSUE :

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

**\*\*\* THE BELOW SECTION IS TO BE FILLED OUT BY THE ZONING INSPECTOR ONLY \*\*\***

THIS REPORT RECEIVED BY ZONING INSPECTOR ON :

DATE REVIEWED

THIS ISSUE ADDRESSED BY ZONING INSPECTOR ON :

DATE ADDRESSED

DESCRIPTION OF ACTION(S) TAKEN :

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

THIS ISSUE ADDRESSED / RESOLVED BY ZONING INSPECTOR ON :

DATE

DESCRIPTION OF ACTION(S) TAKEN OR RESOLUTION(S) :

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