

Jefferson County Environmental Health Citizen Concern/Complaint Form

Date of Report: _____ Confidential Yes No Notify of Response Yes No

Information Taken By (staff name) _____

Citizen Filing Concern/Complaint (if requested to be confidential leave blank)

Full Name _____ Phone _____

Street or Mailing Address _____

Concern/Complaint Regarding (must get this information!!!)

Full Name _____ Phone _____

Street or Mailing Address _____

Location of Problem

Problem or Adjacent Address _____

Are there any gates, dogs, no trespassing signs, etc.? _____

Written Description of Complaint _____

Program Area: Junk Vehicles Animal Services Burning Tobacco Communicable Disease

Drinking Water/Wells Food Illegal Drug Lab Natural Resources On Site Solid Waste

Other _____

Assigned To EH Staff Name _____ Date _____

Is there a "no access" letter or notice on file with the County? Yes No - - Any site visitation due to this complaint will be in compliance with Jefferson County policies and procedures regarding trespassing.

No action necessary: no potential violation in complaint complaint has already been investigated on _____

referred to _____ other _____

Conditions Found and Actions Taken _____

Admin Staff Time Spent _____ Technician Time Spent _____ Director Time Spent _____

Date Completed _____ Person Complained Notified: Yes No Parcel Number _____

Referred to inspector _____ for investigation. Assigned Date: _____

Date	Action
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Additional Comments

Action Summary: # Site Visits _____ # Vehicles removed _____ Tons of SW removed _____

NOCV issued: _____ # Tickets issued _____ Written ___/___/___ Total # _____

Abated? Y N By _____ ___/___/___

CAncelled **FO**rwarded **No**Problems **RE**solved **UN**resolved