REQUEST FOR INVESTIGATION

PLEASE PRINT LEGIBLY AND FILL OUT FORM COMPLETELY

This form should be completed for all filings of complaints with the Town of Meredith. The person or persons filing the complaint shall understand that by signing and/or attesting to the information contained herein may be asked and/or summoned by subpoena to provide testimony. Accordingly, the Town of Meredith can only respond if the following information is provided accurately and completely. Please provide the complainant’s complete address and contact information.

Complainant Information: Name _________________________ Telephone#: _________________________

Legal Mailing Address: ___________________________ ___________________________ ___________________________

Street or PO Box Town/City State Zip Code

________________________________ Date: _______ E-mail: ________________________________

Signature of Complainant

SUBJECT OF THE COMPLAINT

Property Owner Name (if known): ________________________________

Address of Subject Property (if known): ________________________________

Location of Subject Property, if address is NOT known. Be as detailed as possible: ________________________________

__________________________________________________________________________________________

Relationship of the Complainant’s Property to the Subject Property: ________________________________

Description of Complaint. Be as detailed as possible. Use a separate sheet if necessary: ________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

Can the alleged code violation be seen from the public right of way? ………Yes______ No______

Is the town investigator permitted on your property to view and/or take photos of the alleged code violation? ……… Yes ____ No____

Send completed form to: Town of Meredith Attn: Code Enforcement Officer

41 Main Street Meredith, NH 03253

Town of Meredith – Staff Use Only

Date Received: _______ Notes: __________________________________________________________

___________________________________________________________

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