

NEWPORT TOWNSHIP COMPLAINT FORM

CODE & NUISANCE ENFORCEMENT

PERSON FILING COMPLAINT:

NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE: _____

AGAINST WHOM THE COMPLAINT IS FILED:

NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE: _____

NATURE OF COMPLAINT:

DATE: _____ SIGNATURE: _____

COMPLAINANT FORM MUST BE FILLED OUT COMPLETELY, INCLUDING SIGNATURE, OR NO ACTION WILL BE TAKEN.

PERSONS MAKING FALSE STATEMENTS ARE SUBJECT TO PROSECUTION UNDER SECTION 4904 (A) OF THE PENNSYLVANIA CRIMES CODE RELATING TO UNSWORN FALSEIFICATION TO AUTHORITIES. I AFFIRM THE ABOVE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.