



Condition Compliance Complaint Form

County of Ventura • Resource Management Agency • Planning Division

800 South Victoria Avenue, Ventura, CA 93009 • 805 654-2457 • 805 654-6509 Fax

Complaint Against

Name: (if known) Owner Tenant

Site Address: (of problem)
(Required)

Location: (nearest cross street)

Assessor's Parcel Number: (if known) - 0 - -

Property Owner Name: (if different from above)

Describe Complaint: (this space has a 500 character limit, if you need more space, please go to the next page)

Have you noticed any of the following on the subject property, such as recent police activity, vicious dogs, armed or aggressive occupants? No

Yes, explain:

Complaining Party

(This information will be kept confidential unless ordered to be released by court order.)

Have you filed a complaint against this party before? Yes No

If yes, how many times, when, and with which departments?

Name:

Address:

Telephone: Day: () Evening: ()

Do you wish to receive copies of correspondence to the offending party? Yes No

Signature of Complainant: _____ Date:

(Required if submitted by fax or U.S. Mail)

Anonymous Complaints Will Not Be Investigated



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Continue Describing Complaint: