TOWN OF TRURO Truro Building, Health, Conservation Departments P.O. Box 2030 Truro, MA 02666

GENERAL COMPLAINT FORM

Date:		
This is a formal request for enforcement of an alleged very the following are the facts in the case:	riolation. Please notify me of any action or	refusal to act in writing.
Property address of alleged violation:		
Street		(Map & Parcel)
Property owner's name(s):		
Property owner's mailing address:		
Date(s) of alleged violation(s):		
Nature and details of alleged violation(s):		
Name(s) of person(s) filing complaint:		
Mailing address of complainant(s):		
Local address of complainant, if different than above: _		
Home phone #	Work phone #:	
I qualify as an "aggrieved party" and do believe that the Town of Truro to institute a legal action in the courts, I huntil then I desire this information to be confidential.		
Signature of complainant(s)		Date