



**TOWN OF WESTPORT**  
 PLANNING & ZONING DEPARTMENT  
 Town Hall, 110 Myrtle Avenue  
 Westport, CT 06880  
 Phone (203) 341-1030, Fax (203) 454-6145

<i>Official Use Only:</i>
Date Received _____
Received by _____

## ZONING VIOLATION COMPLAINT FORM

Complete items **1, 2, & 3** *All complaints are a matter of public record and subject to the Freedom of Information Act*

**1** Address of Complaint: \_\_\_\_\_

**2** Please print **your** name, address, & phone number or check here for Anonymous  \* See Note Below

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**3** Describe your Complaint in detail:

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If you are including Attachments and/or Pictures, please check this box.

We prioritize the P&Z complaints depending on severity or safety and we anticipate inspection within 2 weeks.

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*For Official Use Only. Do not write below.*

Inspected by: _____	Date: _____	Time: _____	Pictures <input type="checkbox"/>
Notes:			
Follow-Up Inspection by: _____	Date: _____	Time: _____	Pictures <input type="checkbox"/>
Notes:			

\* The P&Z Dept. will ONLY investigate anonymous complaints when staff determines that the reporter violation may pose an immediate threat to the public health, safety or welfare of the community.