



CODE ENFORCEMENT OFFICER
CEO@villageofeastnassau.org

PO Box 268
East Nassau, NY 12062

BUILDING DEPARTMENT COMPLAINT FORM

Information shall be supplied by citizen making complaint

Date _____

Name of complainant _____

Address of complainant _____

Telephone # _____

Email address of complainant _____

Problem/issue _____

Building code or local law sections being violated (if known): _____

For what reason is this complaint being made?

Health _____ Safety _____ Welfare _____

Name of person complaint is made against _____

Address _____

Owner and address of property (if different from above):

Tax map # (if known) _____

I understand that this complaint may result in a court or other enforcement action being taken against the property owner and/or tenant.

Signature of complainant _____