

Valley Township  
P.O. Box 467  
890 West Lincoln Hwy  
Coatesville, PA 19320



Department of  
Code Enforcement  
610-384-5751 Ext. 4  
Fax: 610-384-2746

# Complaint Form

Date of complaint: \_\_\_\_\_ Complaint by: Mail or In Person

Your name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, and Zip Code: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_

Cell or Work Number: \_\_\_\_\_

**Address of Violation:** \_\_\_\_\_

**Owner of Property in Violation:** \_\_\_\_\_

**Nature of Complaint:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The above information is accurate to the best of my knowledge. I also understand that the township may need my testimony in any court proceeding, which may result from my complaint.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date of Signature

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## *For office Use Only*

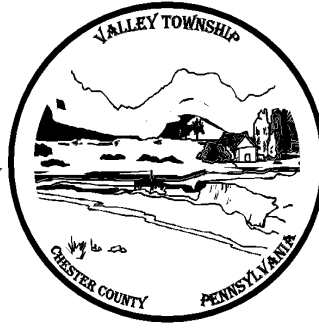
Date Investigated: \_\_\_\_\_ Inspector: \_\_\_\_\_

Findings: \_\_\_\_\_

\_\_\_\_\_

See Reverse Side for Action Taken and Follow-Ups

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Action(s) Taken

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Picture taken:  Yes  No      On File

Person(s) Contacted: \_\_\_\_\_  
\_\_\_\_\_

Violation Issued?  Yes  No      Date of Notice \_\_\_\_\_  
Days to Comply: \_\_\_\_\_      Can person get extension?  Yes  No

Response to Complaint:  
\_\_\_\_\_  
\_\_\_\_\_

Citations Filed with District Court:  Yes  No  
Subpoena List for District Court:  
\_\_\_\_\_  
\_\_\_\_\_

Final Results:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_