



COUNTY OF SANTA CRUZ

PLANNING DEPARTMENT

701 OCEAN STREET, 4TH FLOOR, SANTA CRUZ, CA 95060
(831) 454-2580 FAX: (831) 454-2131 TDD: (831) 454-2123
KATHLEEN MOLLOY PREVISICH PLANNING DIRECTOR

CONFIDENTIAL CODE COMPLIANCE COMPLAINT FORM

Please complete all sections of this form. You may be contacted for additional information about the alleged violation. We do not accept anonymous complaints; however, the identity of anyone reporting code violations is kept confidential and is protected under California Code Section 6250 et.seq.

REPORTING PARTY CONFIDENTIAL INFORMATION:

Your Name: _____ Day Time Phone #: _____

Your Address: _____ Cell Phone #: _____

LOCATION OF VIOLATION: (identify the property where the violation(s) exist.)

Address: _____ Assessor's Parcel No.: _____

Cross Street: _____ Property Owner(s) Name: _____

PLEASE DESCRIBE IN DETAIL THE EXTENT OF THE ALLEGED VIOLATION(S): _____

Is this an urgent situation that is creating an immediate hazard? Yes No If yes, please explain: _____

Has Sheriff or other enforcement agency responded recently? Yes No If yes, please explain: _____

What steps have you already taken to resolve this problem? _____

How is this violation detrimentally impacting you? _____

PLEASE NOTE: SOME VIOLATIONS ARE HANDLED BY OTHER GOVERNMENTAL AGENCIES / DEPARTMENTS.
PLEASE CONTACT THE AGENCIES / DEPARTMENTS LISTED BELOW FOR THE FOLLOWING:

- Abandoned Vehicles..... County Public Works Department, 454-3139
- Animal Control..... County Animal Control, 454-7303
- Drainage..... County Public Works Department, 454-2160
- Septic Tank Failure..... County Environmental Health Services, 454-2022
- Substandard Housing Conditions..... County Environmental Health Services, 454-2022
- Weed Abatement..... Local Fire Department

Upon receipt of your complaint, the County will send written notification to the owner of the property where the violation is alleged to exist. Do you wish to receive a copy of this letter? Yes No

I certify that the information above is accurate to the best of my knowledge.

Signature

Date

IF YOUR COMPLAINT IS URGENT IT CAN BE FAXED OR HAND DELIVERED. FAX NUMBER AND ADDRESS ARE LOCATED AT THE TOP OF THE FIRST PAGE.