

Town of Pavilion

PO Box 126
Pavilion, NY 14525
Ph (585)584-3850 fax (585)584-8533

Date ___/___/___

ZONING VIOLATION COMPLAINT

Complainant _____ Phone _____

Address _____

Address of alleged violation _____

Nature of Complaint: Please be as specific as possible.

Signature _____

Zoning Ordinance Section Pertaining To Complaint _____
Action Taken _____

Received By _____

Date ___/___/___