



**TOWN OF LOOMIS**  
 3665 Taylor Road  
 P.O. Box 1330  
 (916)652-1840 ☎ (916)652-1847 FAX

**CODE ENFORCEMENT/  
 COMPLAINT FORM**

**CONFIDENTIAL**

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REPORTED BY (print name)

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ADDRESS

---

TELEPHONE

---

SIGNATURE

---

\*Reporting parties are not normally contacted regarding case status.

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LOCATION/ADDRESS OF REQUEST

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OCCUPANT NAME

---

OWNER NAME

---

OWNER ADDRESS

---

OWNER TELEPHONE

---

ASSESSORS PARCEL NUMBER

**NOTE:** Due to legal requirements, only written and signed complaints can be investigated. Complaints will remain confidential unless legal action is taken that may require the complainant to be specifically identified.

**Type of Complaint:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\*\*\*\*\*  
**OFFICE USE ONLY**

Date Received: \_\_\_\_\_

Assigned to: \_\_\_\_\_

**ACTION TAKEN:**

( ) Contact made with owner/inspected onsite

\_\_\_\_\_

( ) No violation

\_\_\_\_\_

( ) Letter/Administrative Warning sent

\_\_\_\_\_

\_\_\_\_\_

( ) Administrative Citation/Fine sent

\_\_\_\_\_

\_\_\_\_\_

( ) Notice of Administrative Hearing sent

\_\_\_\_\_

\_\_\_\_\_

( ) Hearing Officer's Decision sent (Manager)

\_\_\_\_\_

\_\_\_\_\_

( ) Court Order (Attorney)

\_\_\_\_\_

\_\_\_\_\_