



PLEASE RETURN TO
Town of Selma
Planning Department
114 N. Raiford Street
Selma, NC 27576
(919) 965-9841
(919) 965-4637 (fax)

Town of Selma
CODE COMPLAINT FORM

DATE \_\_\_\_\_

CITIZEN'S NAME OBSERVING PROBLEM \_\_\_\_\_
(Please print, must be legible)

COMPLAINT RECEIVED [ ] Phone [ ] Office Visit [ ] Field Inspection [ ] Mail / Fax / Email

LOCATION OF PROBLEM

Street name, number or identifying landmarks and directions (be very specific; attach a drawn map if necessary).

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

TYPE OF PROBLEM THAT HAS BEEN OBSERVED (Check appropriate box then describe in detail)

[ ] Vehicular [ ] Overgrown Grass / Vegetation [ ] Unsafe Structure [ ] Other

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

CAN PROBLEM BE SEEN FROM PUBLIC-RIGHT-OF-WAY? [ ] Yes [ ] No

DATE PROBLEM WAS OBSERVED \_\_\_\_\_

[ ] PHOTOGRAPH(S) ATTACHED (Preferably dated. Please note that any photographs submitted will not be returned.)

Property Owner's Information (if known)

PROPERTY OWNER'S NAME \_\_\_\_\_
ADDRESS \_\_\_\_\_

SIGNATURE \_\_\_\_\_

ADDRESS \_\_\_\_\_

EMAIL / PHONE # \_\_\_\_\_

PLEASE NOTE THAT BY SUBMITTING THIS FORM, ALL INFORMATION BECOMES PUBLIC RECORD.
FORM MUST BE COMPLETE.