



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

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.