



**City of Long Branch
Department of Building and Development
Office of Planning and Zoning**



344 Broadway
Long Branch NJ, 07740

Phone (732) 571-5647

Fax (732) 222-7755

COMPLAINT FORM

Date of Complaint: _____ Date Received by P&Z Office: _____

PERSON MAKING COMPLAINT (COMPLAINANT):

Name: _____

Address: _____ Block: _____ Lot(s): _____

Telephone: _____ Cell Phone: _____

Signature: _____

ADDRESS OF PROPERTY WITH PROBLEM:

Address: _____ Block: _____ Lot(s): _____

COMPLAINANT HAS SEEN OR SUSPECTS THAT:

Taking Complaint: _____ **Via:** Mail _____ In Person: _____ Phone: _____

Copy Forwarded To: Zoning Officer / Building Department / Code Enforcement

OFFICE USE ONLY

FINDINGS:

Field Inspection Date: _____

Inspected By: _____

File & Field Findings: _____

ACTIONS:

