

Town of Saratoga Formal Complaint Form

BUILDING DEPARTMENT

*Information is Confidential

Date: _____

*Complainant's Name: _____ *Phone: _____

*Address: _____

Location of Violation: _____

Cross Street of Violation: _____

Owner's Name & Phone Number: _____

Nature of Complaint: _____

*If this ends up in litigation, please know you may be required to go before the Judge.

I, _____, understand and agree that I may end up appearing before the Judge as a witness to this complaint.

Print Name

Signature