

# TOWN OF CHAPLIN

CONNECTICUT 06235

INCORPORATED 1822



## ZONING COMPLAINT FORM

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

Location of Alleged Violation: \_\_\_\_\_

Map: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_ (attach assessor's field card)

Name & Address of Property Owner: \_\_\_\_\_

Nature of Alleged Zoning Violation: \_\_\_\_\_

\_\_\_\_\_

Applicable Section(s) of the Chaplin Zoning Regulations: \_\_\_\_\_

\_\_\_\_\_

Complainant: \_\_\_\_\_

Complainant's Address: \_\_\_\_\_

Complainant's Telephone Number: \_\_\_\_\_

*The Planning & Zoning Official is a part-time employee and will investigate substantiated zoning violations in the order in which they are received, and as time permits. You may submit a revised complaint form and/or additional information at any time.*

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### FOR OFFICIAL USE ONLY

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Visual Site Inspection(s) (attach photos if necessary):

First Notice (attach):

Official Notice of Violation & Order (attach):

Referral to Town Counsel for Legal Remedy (attach):