

Village of Danville

P.O. Box W
DanvilleOhioZoning@gmail.com

Zoning Complaint Form

Date: _____

Complaint Filed By:

Name: _____

Address: _____

Phone: _____

Signature: _____

Nature of Complaint: ___ Junk/Litter ___ Grass ___ Building ___ Other

Please Describe, in detail, the nature of the complaint. Use additional sheets as necessary:

Location of the Complaint:

Address: _____

Other Description of Location: _____

Property Owner (if known): _____

Village Use Only

Complaint Received By: _____ Date: _____

Action Taken: _____