

CHARTER TOWNSHIP OF COMSTOCK  
ATTN: ORDINANCE ENFORCEMENT OFFICER  
P.O. BOX 449  
COMSTOCK, MI 49041-0449  
[ordofficer@comstockmi.gov](mailto:ordofficer@comstockmi.gov) or  
[supervisor@comstockmi.gov](mailto:supervisor@comstockmi.gov)

**Save a copy of this form and  
use it as an attachment to  
send by email, regular mail  
or personal delivery.**

## CHARTER TOWNSHIP OF COMSTOCK COMPLAINT FORM

Date Filing Complaint: \_\_\_\_\_

ADDRESS OF TO BE INVESTIGATED: \_\_\_\_\_

PLEASE DESCRIBE THE CONDITIONS YOU ARE REPORTING TO THIS OFFICE FOR INVESTIGATION:

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DESCRIBE THE CONDITIONS AFFECTING THE PROPERTY:

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COMPLAINTS CAN REMAIN ANONYMOUS. DO YOU WISH TO BE CONTACTED: \_\_\_\_\_ YES \_\_\_\_\_ NO

PLEASE PROVIDE YOUR CONTACT INFORMATION:

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_