

LEHIGH TOWNSHIP

1069 Municipal Road • Walnutport, PA 18088

Phone: 610-767-6771 • Fax: 610-767-1452

COMPLAINT FORM

This form must be completed for all complaints relating to zoning, nuisance, i.e., noise, light, odor, weeds, grass, vehicles, etc. All complaints shall be made in writing and filed at the office located at the Municipal Building of Lehigh Township. Lehigh Township can only respond to your complaint if the requested information on this form is provided. All information is kept confidential unless otherwise forced by the courts.

Name of Complainant: _____

Address: _____

Phone Number: _____

Email Address: _____

Name of property owner (where violation exists): _____

Address where violation exists: _____

Descriptions of alleged violation in detail (Please include times, dates and pictures if possible):

THE PERSON OR PERSONS FILING THIS COMPLAINT SHALL UNDERSTAND THAT BY SIGNING AND/OR ATTESTING TO THE INFORMATION CONTAINED HERIN MAY BE ASKED AND/OR SUMMONED BY SUBPOENA TO PROVIDE TESTIMONY ON THIS COMPLAINT.

PLEASE SIGN BELOW THAT YOU AGREE AND ATTEST THAT THE COMPLAINT DESCRIBED ABOVE IS TRUE AND ACCURATE TO THE BEST OF YOUR KNOWLEDGE.

SIGNATURE _____ DATE _____