

VILLAGE OF STILLWATER

TRUSTEES:

John Basile
Dorothy DeMarco
Patrick Nelson
Judith Wood-Zeno

INCORPORATED 1816

1 SCHOOL STREET
PO BOX 507
STILLWATER, NY 12170
(518) 664-6258 FAX 664-2166
Judith Wood-Shaw, MAYOR

ATTORNEY
Dreyer Boyajian LLP
James R Peluso

CLERK/TREASURER
Sheristin Tedesco

BUILDING DEPARTMENT

COMPLAINT AND INVESTIGATION REQUEST

DATE: _____ RECEIVED BY: _____

LOCATION OF VIOLATION: _____

CROSS STREET: _____

OWNER NAME: _____ PHONE: _____

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Nature of the complaint/Reason for investigation:

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Conditions observed/Comments:

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****INFORMATION BELOW IS CONFIDENTIAL****

Complainant: _____ home phone: _____

Address: _____ work phone: _____

Is follow up contact requested? Y/N

Does Complainant want to remain anonymous? Y/N

Follow up dates: _____