PLANNING SERVICES
COMPLIANCE CHECK FORM

For Council officers to investigate areas of possible non-compliance it will be necessary to complete the relevant sections of this form. For your convenience a prepaid addressed envelope is attached or alternatively the form can be hand delivered to the North Road Office.

Details of Person Making the Complaint ***(Your details will not be released to the person causing the complaint)***

Name _____

Address _____

_____

Phone No. _____ Signature _____

Details of Person Causing the Complaint

Name _____

Address _____

_____

Phone No. _____

Details of Complaint (Please explain the problem)

_____

_____

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_____

Investigating Officer _____

Telephone _____

Date of Initial Contact _____ Time _____AM/PM

Action Taken _____

_____

Assessment No. A

(OFFICE USE ONLY)

Complaint Resolved (complainant notified) _____