



BOROUGH OF DELMONT
 77 Greensburg Street
 Delmont, PA 15626
 Ph: 724-468-4422 Fax: 724-468-4356

ZONING COMPLAINT FORM

NAME OF COMPLAINANT: _____

ADDRESS: _____

PHONE: _____ **Email:** _____

STREET ADDRESS and/or TAX MAP NUMBER OF PROPERTY IN DISPUTE:

NATURE OF COMPLAINT:

COMPLAINANT'S SIGNATURE _____ **DATE:** _____

BOROUGH ACTION
DATE OF INVESTIGATION
INVESTIGATION AND EVALUATION OF COMPLAINT
ACTION TAKEN or RECOMMENDED
DATE RESPONSE MAILED TO COMPLAINANT

ZONING OFFICER