

NUISANCE COMPLAINT FORM



WASHINGTON COUNTY
Solid Waste & Recycling Program
155 N First Ave, MS 5A
Hillsboro, OR 97124
Ph. 503-846-3605 Fax 503-846-4490
Email the completed form to:
enforcement@co.washington.or.us

For use in reporting an alleged violation of Nuisance Code Chapter 8.20

FOR OFFICE USE ONLY:

Received:

A. What is the LEGAL address of the property containing the alleged violation?

_____ *address number*

_____ *street name*

_____ *city*

B. Nearest cross street or landmark: _____

C. What is your name and address? _____

name

_____ *address number*

_____ *street name*

_____ *city*

_____ *state*

_____ *zip*

_____ *daytime phone*

Email address: _____

D. Describe the alleged violation:

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E. Who is the person causing the alleged violation? (if known) _____

F. Approximately when did this alleged violation begin? _____

G. Is the alleged violation visible from the public road? Yes No

If no, what is the best vantage point for the inspection?

H. This space is reserved for additional information:

By submitting this complaint, I hereby acknowledge that pursuant to ORS 192.420, the information included in this complaint is subject to public inspection. For more information on Oregon public records law, visit www.DDJ.state.or.us/Public_Records

To submit this complaint:

Click “save as” and attach it to an email to enforcement@co.washington.or.us

— or —

Click “print form” to print the complaint and mail it to:

Code Enforcement
155 N First Ave, MS 5A
Hillsboro, OR 97124