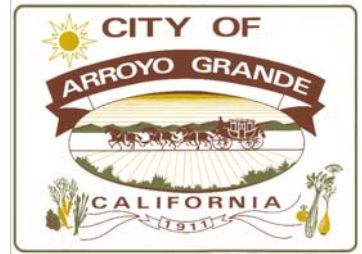


City of Arroyo Grande
Department of Building and Fire
Neighborhood Services

214 E. Branch St. Arroyo Grande, Ca. 93420 805/473-5450



REQUEST FOR FIELD INVESTIGATION

The City of Arroyo Grande will investigate violations of Building, Housing and Zoning regulations. This includes non-permitted construction, substandard housing and use permit and occupancy compliance. If you suspect a violation exists, please fill out this form and return it to the address above. Please provide as much of the following information as possible. Should you have questions regarding a potential violation, need clarification of our regulations or if you need assistance filling out this form, please feel free to call the Neighborhood Services Coordinators at (805) 473-5437.

SITE OR PARCEL WHERE THE POTENTIAL VIOLATION EXISTS

Property Address: _____

Business Name: (If Applicable) _____

Name of Current Owner: _____

Owner Address: _____ Owner Phone #: _____

_____ Property Management Co: _____

_____ Contact Person: _____

SUMMARY OF ALLEGED VIOLATIONS

Describe the alleged violations and provide all information relevant to the complaint. Summarize any hazardous condition or other nuisance created. Attach additional sheets if required.

TO THE PERSONS REQUESTING THE INVESTIGATION:

Provide your name, address and a daytime phone number so we can contact you to clarify potential violations or advise you of the results of our investigation. If you do not provide this information we may not be able to respond to your request. The City of Arroyo grande will keep this information confidential to the extent permitted by law.

| | | | | |
|-----------------|------------|--|-----------------|----------------|
| Name: | | <input type="checkbox"/> Check this box if you would like to be advised of the results of the investigation. | Office Use Only | |
| Address: | | | Referral | Initial / Date |
| | | | Public Works | |
| Phone Number: | | | Police | |
| | | Co. Health | | |
| Office Use Only | | | | |
| Date Received: | | Owner of Record: | | |
| Time: | | Owner Address: | | |
| Received By: | Use Permit | | | |
| APN: | Zone: | | | |