



Community Development Technician

1100 37<sup>th</sup> Street, Evans, Colorado 80620 | (970) 475-1120 | EMAIL: kschaefer@evanscolorado.gov

## HOUSING INSPECTION COMPLAINT

IF THIS COMPLAINT IS BASED IN ANY PART AS THE RESULT OF A LEASE, RENT, DAMAGE DEPOSIT, EVICTION, ETC., THESE ARE CIVIL MATTERS THAT THE CITY OF EVANS DOES NOT GET INVOLVED IN, AND WILL NOT BE RESOLVED AS A RESULT OF THIS COMPLAINT.

DATE RECEIVED \_\_\_\_\_

TIME RECEIVED \_\_\_\_\_

NAME(S) \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

TYPE OF COMPLAINT AND DESCRIPTION \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PROPERTY OWNER/AGENT'S NAME \_\_\_\_\_

PROPERTY OWNER/AGENT'S ADDRESS \_\_\_\_\_

\_\_\_\_\_

PROPERTY OWNER/AGENT'S PHONE \_\_\_\_\_

HAVE YOU CONTACTED THE OWNER/AGENT?                      YES                      NO

IF SO, WHEN? (DATE) \_\_\_\_\_ BY PHONE? \_\_\_\_\_ IN WRITING? \_\_\_\_\_

WAS ACTION TAKEN?                      YES                      NO

*OFFICE USE ONLY*

**INSPECTOR:** \_\_\_\_\_

**PROPERTY OWNER/AGENT CONTACTED BY INSPECTOR?      YES      NO**

**DOES OWNER/AGENT WISH TO BE PRESENT AT INSPECTION?      YES      NO**

**INSPECTION DATE** \_\_\_\_\_ **TIME** \_\_\_\_\_

**REPORT ISSUED TO OWNER/AGENT?      YES      NO**

**PERMIT REQUIRED FOR CORRECTION?      YES      NO**

**FOLLOW-UP INSPECTION MADE?    YES      NO    DATE?** \_\_\_\_\_

**INSPECTOR** \_\_\_\_\_

**COMMENTS**

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