



## CODE ENFORCEMENT REQUEST FORM

36 - 72 hours processing time

Homeowner Name		Acct Number	
Address		City	
Province	Postal Code	Phone	Fax
E-mail			

Code Enforcement Request Taken By (The <b>Employee</b> )	Date Code Enforcement Request Received
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Code Enforcement Request:

Corrective Action:

Has the Code Enforcement request been resolved?  Yes  No

If no, to whom was the request transferred? \_\_\_\_\_

How will the problem be avoided in the future?

Place and Date

\_\_\_\_\_  
Homeowner (Signature)

\_\_\_\_\_  
Employee (Signature)

\_\_\_\_\_  
Homeowner Name

\_\_\_\_\_  
Employee Name