Complaint # Clen Goz-Woz

SANITATION COMPLAINT

| Date 2 5 19 | |
|-------------------------------------|---|
| Name of Complainant | [] ANONYMOUS |
| [Sewer [] Solid Waste [] Other | |
| Nature of Complaint Sptic T | ank Faiker |
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| Directions to site of Complaint | |
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| | 4 Annoth Soman |
| Address and/or phone # 103 E | 10 D D 10 10 10 10 10 10 10 10 10 10 10 10 10 |
| Inspection Information | |
| DATE TIME F PROBLEM(S) FOUND | PERFORMED BY |
| Correction of Problem | |
| DATE COMMENTS | |
| | |