Ordinance Violation Complaint Form

Date:_____

Name:_____

Address:_____

Phone #:_____

Violation Address:_____

Describe complaint in detail:_____

_____

_____

_____

_____

_____

Signature:_____

(Required)

Mail or deliver to: Ovid Township office

381 S. Angola Road

Coldwater, MI. 49036

Attn: Ovid Township Supervisor