

**Public Act 188**  
**Complaint Form**  
Posted 4/29/10

Date of Complaint \_\_\_\_\_

County in which the violation occurred \_\_\_\_\_

**Alleged Violator Information:**

Name of Business:

\_\_\_\_\_

Address:

\_\_\_\_\_

Telephone:

\_\_\_\_\_

Name of Contact Person:

\_\_\_\_\_

Please describe the violation (s), location of violation and date of violation and any other information that will clarify the complaint:

Please describe any steps you took to bring the violation to the attention of the owner/operator of the business:

Complainant's Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

Complainant's Signature \_\_\_\_\_

Date \_\_\_\_\_