

WEST HANOVER TOWNSHIP AUTHORITY COMPLAINT FORM

7171 Allentown Blvd., Harrisburg, PA 17112

717-540-6075, zoning@westhanover.com

APPLICATION IS NOT COMPLETE IF ANY INFORMATION IS MISSING FROM THIS APPLICATION BY APPLICANT

Complainant (person filling complaint): _____

Address of Complainant: _____

Preferred Contact Number: _____ 2nd Contact Number _____

Email: _____

TOWNSHIP STAFF WILL INVESTIGATE WITH COMPLAINT FORM SUBMISSION

Name and Address of Property where violation occurred: _____

Nature of Violation: _____

Will you testify if needed: YES NO Do I have permission to go onto your property? YES NO

Please use additional sheet if necessary

Signature of Complainant

Print name

Date

Office USE ONLY

Tax Parcel: 68- _____ - _____ Date Closed: _____

Resolution _____ Closed By: _____

Investigated By: _____