

Village of North Freedom 105 N Maple St – PO Box 300 North Freedom, WI 53951 608-522-4550 | Fax: 608-522-4574 clerk treasurer@vonf.wi.gov

ORDINANCE VIOLATION COMPLAINT FORM

*All information is **REQUIRED** in order to be submitted. Any information missing will cause this form to be denied from Village Board Action. In order for this to be reviewed in a timely manner, this form needs to be **PHYSICALLY** submitted to the Village Office by 4:00 P.M. on the 1st of the Month.*

REPORTING PERSON/ADDRESS		
Name: Email Address:		
Address: Phone Number:		
Mailing Address: City/State/Zip:		
ALLEGED VIOLATOR		
Property Owner:		
Property Address:		
NATURE OF COMPLAINT		
If you wish to report a suspected violation of the Village of North Freedom's Ordinances, that are not generally reportable to the Sauk County Sheriff's Department, please complete this complaint form and submit as much supporting evidence (i.e. photos, documents etc.) as possible in support of the complaint.		

Date Received by Village Office: ____

You must collect **2** other signatures of **residents/property owners**, who are: 1) not Village Board Members or employees, 2) of the age 18 or older, 3) **ONE** signature per household and address and 4) in agreement of this complaint.

If any information is missing or invalid, this will cause the form to be denied from Village Board Action.

Reporting Person Signature:
Resident/Property Owner Signature:
Name (Printed):
Complete Address:
Phone Number:
Resident/Property Owner Signature:
Name (Printed):
Complete Address:
Phone Number:

NOTICE OF WI PUBLIC RECORDS LAW

Please be advised that under Wisconsin's Public Records Law, WI Stats. 19.31, et al, the complaint and supporting evidence will be available for public review upon request. Only in an exceptional case may access be denied.

FOR OFFICE USE ONLY

Owner of Property:				
Owner's Address: Occupant's Name: Date of Inspection: Person Conducting Inspection: Inspection Findings:				
Date of Village Regular Board Meeting:				
Village Board Action: Send Letter – Conta Sheriff's Department – Other:	act Building Inspector – Contact Sauk County			
Date Violation Letter Sent by Mail:				
Response (if any) from Owner/Occupant -	- including date:			
Date of Compliance:	Case Closing Date:			
Additional Notes:				