

SIGNATURES

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 – Contact Building Inspector – Contact Sauk County Sheriff's Department – Other: _____

Date Violation Letter Sent by Mail: _____

Response (if any) from Owner/Occupant – including date: _____

Date of Compliance: _____ Case Closing Date: _____

Additional Notes: _____

