



City of Bulverde

CODE COMPLIANCE COMPLAINT FORM

Name: _____ Date: _____
E-mail: _____
Address: _____
City: _____ Zip Code: _____ Ph.#: _____

Type of Violation: Vehicle Illegal Dumping Environmental Health (Rodents/Vermin/Insects)
 Substandard/Vacant/Dangerous Building No Permit Building/Driveway Animal(s) at large
 Noise Junk/Debris Sign Home Office Control Burn Violation Other (Describe below)

Description of Violation: _____

Street Address: _____
Cross Street: _____

For Office Use Only – CFS #: _____

Dates of Prior Violations: _____
Referred to: _____ Date Referred: _____

Disposition: _____

Follow Up Action Required: _____ Date of F/U: _____ Action Required: _____

Citation # Issued: _____ Citation Date: _____ Violation: _____
Citation # Issued: _____ Citation Date: _____ Violation: _____

Date Closed: _____ Officer: _____