

**Camden County**  
**Code Enforcement Office**

**Complaint Form / Request for Investigation**

**Person Making Complaint / Request:** \_\_\_\_\_

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

\_\_\_\_\_

**Person Taking Complaint Request:** \_\_\_\_\_

(County Employee)

**Date of Complaint / Request:** \_\_\_\_\_

**File Number Assigned:** \_\_\_\_\_ **by** \_\_\_\_\_

(Name of official assigning number)

**Violators Name:** \_\_\_\_\_

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

\_\_\_\_\_

**Violation Address:** \_\_\_\_\_

\_\_\_\_\_

**PIN:** \_\_\_\_\_

**Method of Complaint / Request:** \_\_\_\_\_

**Nature of Complaint / Request:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**CEA Agent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Complainant Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_