



PLANNING & BUILDING DEPARTMENT
PO Box 158
418 E 2nd Street
Whitefish, MT 59937
Phone: 406-863-2410 Fax: 406-863-2409

File # _____
Date: _____
Staff: _____

REQUEST for INVESTIGATION of POTENTIAL VIOLATION

Please Fill In:

Address of Concern: _____

Assessor number, legal description, if known: _____

Name of property owner, if known: _____

Your Name* : _____

Contact Telephone Number: _____ Date the Concern was First Observed: _____

Would You Like a Return Call? Yes: _____ No: _____

Type of Concern: (Please check all that apply)

Decayed Property: _____	Dust Abatement: _____	Lakeshore: _____
Snow/Ice Removal: _____	Sign Violation: _____	Zoning: _____
Noxious Weeds: _____	Junk Vehicle: _____	Other: _____
Dark Sky Lighting: _____		

Brief Description/Explanation of Concern (Include any other information you believe may assist staff in reviewing the complaint and expediting its review. This could include photos of the violation.):

FOR OFFICE USE ONLY

How was Complaint Reported?

In Person: _____

Phone: _____

Letter: _____

Message: _____

Date of Site Visit: _____

Date of Follow-Up: _____

Recommendation(s): _____

Status: _____

Date: _____

* staff will not process anonymous complaints