



Complaint/Inquiry Form

FILL OUT AND MAIL TO OR EMAIL TO: Wetland Enforcement Officer
Town of Middlefield, Land Use Office
405 Main Street, Middlefield, CT 06455

Date: _____

Location of Violation: _____

Property Owner (if known): _____

Property Owner, Mailing Address: _____

ANONYMOUS COMPLAINTS WILL NOT BE INVESTIGATED

COMPLAINANT (print name): _____

ADDRESS: _____

TELEPHONE: _____

EMAIL: _____

COMPLAINT/INQUIRY _____

SIGNATURE OF COMPLAINANT: _____

Office Use Only:

THE FOLLOWING SECTIONS TO BE FILLED OUT BY ZONING ENFORCEMENT OFFICER:

INSPECTION: _____

DISPOSITION: _____
