



Date Received	__ / __ / __
Received By	_____
Case Number	_____
Section	_____
Township	_____
Range	_____

**MORGAN COUNTY  
PLANNING AND BUILDING DEPARTMENT  
CODE COMPLIANCE COMPLAINT FORM**

**Complainant**

**Alleged Violator**

Name \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Address and or location \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_

Email \_\_\_\_\_

**Date of Complaint:** \_\_\_\_\_

**Nature of Alleged Violation:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

How are you/your property impacted? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Where is your property in relation to the alleged violation? \_\_\_\_\_  
 \_\_\_\_\_

Have you discussed your concerns with the property occupant? Yes \_\_\_\_\_ No \_\_\_\_\_  
 If not, please explain why: \_\_\_\_\_  
 \_\_\_\_\_

Are you in a Subdivision which has covenants that prohibit the activity reported? Yes \_\_\_ No \_\_\_  
 If so, have you contacted the Homeowners Association for enforcement? Yes \_\_\_ No \_\_\_  
 May we contact you if needed? Yes \_\_\_ No \_\_\_

May we disclose your name to the alleged violator? Yes \_\_\_ No \_\_\_

*It is the policy of Morgan County to maintain the anonymity and confidentiality of persons complaining of zoning violations, however, complainants should be aware that the county may be required to release this information under the Colorado Open Records Act, other laws, or by order of a court.*

Signature: \_\_\_\_\_  
 (Complaint will **not** be processed without signature)