



TOWN OF NORFOLK INLAND WETLANDS & ZONING CONCERN/COMPLAINT

Date: _____

How Reported: ☐ In Person ☐ Mail ☐ Email ☐ Telephone

Name of Person Submitting This Form: _____

Address: _____

Phone Number: _____ Email Address: _____

Location of Concern/Complaint: _____

Description of Concern/Complaint:

I grant permission to Land Use staff to come onto my property for the purpose of visualizing the above-described issue of concern in order to determine whether a violation exists. I understand that if permission is not granted and the potential violation is not visible from the public road, a thorough investigation may not be possible.

☐ I grant permission. ☐ I do not grant permission.

Signature: _____

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(OFFICE USE ONLY)

Received By: _____ Forwarded To: _____

Action Taken:

Additional Follow-up Required:
