



City of Millbrae

CODE ENFORCEMENT COMPLAINT FORM

Site Address with Violation/s: _____ Date: _____

Property Owner/Tenant (if known):

Name: _____

Address: _____

Telephone: _____

Reporting Party (CONFIDENTIAL):

(Pick One) Tenant Neighbor Other

Name: _____

Address: _____

Phone/Email: _____

Landlord/Manager & Contact Ph. #: _____

Nature of Complaint: _____

- Office use only -

Complaint Accepted by: _____

Date: _____

Code Case No.: _____

Reviewed by: _____

Date: _____

Additional Notes:

Referred to: _____

Date: _____

Last Update: October 2018