



Department of Code Enforcement
Building Division
70 Tapley Street, Springfield, MA 01104

(413) 787-6031-TTY (413) 787-6641
FAX (413) 787-6023

Special Investigation Request

Date _____

Location of Complaint _____

Owner's Name _____

Owner's Address _____

Complainant's Name _____

Complainant's Address _____

Complaint _____

I understand that as a complainant, I may be asked to participate with the Code Enforcement Department, Building Division by appearing with a Zoning Enforcement Official at Court in the event that the official is personally unable to verify my allegations. I understand that my name will not be disclosed unless said disclosure is ordered by the Court.

Signature of Complainant



DO NOT WRITE BELOW THIS LINE

Date of Initial Review _____

Inspector Assigned _____

Conditions Found _____

Action Taken _____
