

THORNHURST TOWNSHIP

LACKAWANNA COUNTY

HC 1, BOX 238B
THORNHURST, PA 18424
(570) 842-4273

ORDINANCE VIOLATION AND ZONING COMPLAINT FORM

Complaint No. _____

Date _____

Complainant: _____

Phone: _____

Address: _____

Violation Address: _____

Owner's Name: _____

Phone: _____

Address: _____

(if available)

Complaint: _____

(describe in detail)

Signature of Complainant (mandatory)

INSPECTOR'S REPORT

Date _____

Date of Inspection: _____

Violation Type: _____

Describe Briefly: _____

Photos Taken? _____ Date (if different from above) _____

Violates Code Section (s): _____

Action Taken: _____

Signature of Enforcement Officer