

**MARIPOSA COUNTY
REQUEST FOR INVESTIGATION**

This form is to be utilized when a citizen or governmental official is requesting that a County Department investigate a possible violation of a County law or other health and safety related problem.

This form is confidential in accordance with County policy. However, the form must be released if required by a court of law.

Complainant Information

(Providing your name and contact information is optional)

Complainant Name (person completing this form)

Telephone Number

Mailing Address

Town/Area

Zip Code

Email Address: _____

Do you wish to be contacted with the results of this investigation?

Yes

No

I certify that the information provided on this form is true and correct to the best of my knowledge.

Signature (Optional)

Today's Date

Description of Violation / Problem

Street Address of Violation / Problem Town / Area

Assessor's Parcel Number (APN)

Property Owner Name(s) – If known

Property Owner Mailing Address

Town

Zip Code

Nature of violation or problem (please be as specific as possible):

Request for Investigation - Page 2.

Driving directions to violation site from State Highway or Major County Road _____

FOR STAFF USE ONLY

Staff Person Assigned _____

Date of Inspection _____

Investigation Findings:

Action Taken: _____

Affiliated Files: _____

Case Closed As: Unsubstantiated Abated Referred to Appropriate Department

Follow-Up:

Other Affected Departments Notified: (circle)

Planning Building Health Public Works Sheriff Child Protective Services _____

Other

Letters sent to property owner _____

Date

Date

Date

Complainant notified of action _____

Date

Date

Date

(Indicate if by phone or letter)

Notes: _____
