City of SHADY COVE

small town, BIG ADVENTURES

Mayor
Cheryl Singleton

Councilors
Paige Winfrey
Steve Mitchell
Art Stirling
Kathy Nuckles

Complaint Form

Location of Potential Violation (address within City limits is required):

_____

Complaint (please describe in detail):

_____

_____

_____

Violator Information (name, address, etc. if know):

_____

_____

Complainant Information

Name: _____

E-mail: _____

Address: _____

Phone Number: _____ Phone: _____

Contact preference (via phone, e-mail or not at all): _____

Signature: _____

Date: _____

RETURN COMPLETED FORM TO:

City of Shady Cove

P O Box 1210

Shady Cove, OR 97539

Office use only

Ordinance or Resolution number: _____