



ZONING VIOLATION COMPLAINT FORM
AU TRAIN TOWNSHIP ZONING
PO Box 33, Au Train MI 49806 Phone: (906)892-8265
www.austraintownship.org

Please print or type:

Complainant's Name: _____ Phone: _____

Address: _____ E-Mail: _____

Property Address: _____
(If known, also please include the following information below)

Parcel Number: 02 - 001 - _____ - _____ - _____ Zoning District: _____

Owner's Name: _____ Phone: _____

Owner's Address: _____ E-Mail: _____

Ordinance Section Number(s) Relative To This Appeal: _____

Provide a Description of Your Complaint: _____

Signature of Complainant

Date

Return completed form to: Au Train Township Zoning Administrator, PO Box 33, Au Train MI 49806 or via email: autrainzoning@gmail.com. There is also a DropBox located on the Clerk/Treasurer Office door.

PLEASE NOTE: NO ACTION WILL BE TAKEN UNLESS THIS FORM IS SIGNED AND DATED.

A. Review of the complaint as filed indicates:

- No violation of the provisions of the Au Train Township Zoning Ordinance
- There may be a violation of the following provisions of the Au Train Township Zoning Ordinance:

B. Review of the premises indicates:

- No violation of the provisions of the Au Train Township Zoning Ordinance
- Violations noted of the following provisions of the Au Train Township Zoning Ordinance:

Date of Inspection: _____

C. Action of Complaint:

- No enforcement action taken as no violation was found. Complainant was notified via (mail/email) that no violation was found.
- Action taken to address the violation noted in Section B above.

Zoning Administrator Signature _____ Date: _____