



ZONING ENFORCEMENT REPORTING FORM

Please use this form to record and report possible zoning violations or concerns related to any zoning issue you observe. Mail or email this form with your signature to the Lyndon Zoning Administrator (PO BOX 167 Lyndonville, VT 05851 or zpa@lyndonvt.org). Include your name and email should we require additional information.

SUBJECT PROPERTY INFORMATION		
Location of incident:		
Date and time of incident:		
Concern/Complaint:		
COMPLAINANT INFORMATION		
Name:	Phone:	
Mailing Address:	City:	
Email:	State:	Zip:
<p>Complainant Acknowledgement: <i>As the complainant described above, I hereby submit a Zoning Violation Complaint. The information on this form is true and accurate to the best of my knowledge.</i></p>		
Signature _____		Date _____

THIS SECTION TO BE COMPLETED BY STAFF	
PROPERTY OWNER INFORMATION	
Property Address/Location: _____	
Contact Information: _____	
TOWN ZONING BYLAWS CITATION	
Associated Section: _____	
Additional Information: _____	
ZONING ADMINISTRATOR ASSESSMENT & DETERMINATION	
The Zoning Administrator visited the site on: _____	
After reviewing the complaint and conditions on the site, the Zoning Administrator has made the following determination:	
<input type="checkbox"/> Zoning Violation Exists <input type="checkbox"/> No Zoning Violation	
Signature if Zoning Administrator: _____	Date _____