



COUNTY OF DUPLIN

BUILDING INSPECTIONS DEPARTMENT
PO BOX 950, 209 SEMINARY STREET,
KENANSVILLE, NC 28349
(910) 296-2124 FAX: (910) 296-2166

COMPLAINT REPORT FORM

Your Name: _____

Address of Concern: _____

Contact Phone: _____

COMPLAINT PROPERTY OWNER

Name: _____

Mailing Address: _____

Contact Phone: _____

NATURE OF COMPLAINT

IF ADDITIONAL SPACE IS NEEDED, YOU MAY USE THE BACK OF THE PAGE

Is Property A Rental? ____ Y / ____ N Are you the Tenant? ____ Y / ____ N

How long has problem(s) existed? _____

Did problem exist when you moved in? ____ Y / ____ N

By signing below, I attest under penalties of Perjury that the above statements are to the best of my knowledge and belief to be true.

Signature: _____

Date: ____/____/20____ Print Name: _____

