

BOROUGH OF MACUNGIE
Lehigh County
21 Locust Street
Macungie, PA 18062

Phone: 610-966-2503
Fax: 610-966-2788
www.macungie.pa.us



COMPLAINT

THIS FORM SHALL BE COMPLETED FOR ALL FILINGS OF COMPLAINTS WITH THE CODE ENFORCEMENT DEPARTMENT OF THE BOROUGH OF MACUNGIE.

The person or persons filing the complaint shall understand that by signing and/or attesting to the information contained herein may be asked and/or summoned by subpoena to provide testimony.** Accordingly, the Borough of Macungie can only respond if the following information is provided, accurately and completely.

Please provide the complete address, including City/Town and zip codes.

NAME OF COMPLAINANT _____

ADDRESS OF COMPLAINANT _____

TELEPHONE NUMBER _____

THIS COMPLAINT INVOLVED THE PROPERTY OF:

NAME(S) _____

ADDRESS _____

RELATIONSHIP OF COMPLAINANT'S PROPERTY TO THIS SUBJECT PROPERTY: _____

DESCRIBE THE COMPLAINT IN DETAIL: _____

SIGNED** _____ **DATE** _____