



# Salton Community Services District

Mitch Mansfield  
General Manager

## COMPLAINT AND INVESTIGATION REQUEST

RECEIVED BY: \_\_\_\_\_

DATE: \_\_\_\_\_

LOCATION OF VIOLATION: \_\_\_\_\_

CROSS STREET: \_\_\_\_\_

OWNER: \_\_\_\_\_ PHONE: \_\_\_\_\_

Nature of the complain/ Reason for investigation:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Conditions observed / Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

INSPECTED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

**\*\*\* INFORMATION BELOW IS CONFIDENTIAL \*\*\***

COMPLAINANT: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ WORK PHONE \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

IS FOLLOW UP CONTACT REQUIRED? YES \_\_\_\_\_ NO \_\_\_\_\_

DOES COMPLAINANT WANT TO REMAIN ANONYMOUS? YES \_\_\_\_\_ NO \_\_\_\_\_

FOLLOW UP DATE (S): \_\_\_\_\_