

**CITY OF BAY VILLAGE Division of  
Building/Zoning Inspection**

**Request for Inspection / Action / Complaint**

**Instructions for use: Please fill out the information requested below. Please email completed form to [tangle@safebuilt.com](mailto:tangle@safebuilt.com)**

**Please review “Concerns/Complaints” for the types of complaints handled by the Building Department. If the issue is handled by any other department, please contact that department directly.**

Date:

Address to be inspected:

Nature of complaint:

Complainant’s name:

Complainant’s address and phone number:

**Do not write below this line.**

---

***This portion to be completed by Building Department personnel***

Assigned to inspector:

Date:

By:

Was a Violation Notice sent? Yes \_\_\_\_\_ No \_\_\_\_\_ Date sent: \_\_\_\_\_

Findings: