Nuisance Complaint Form

Monona County Zoning Department

610 Iowa Avenue Onawa, Iowa 51034 712/433-3400

(Owner) Las	(Owner) Last Name		First Name		Work Phone
Address Where Violations Exist		Exist	City	State	e Zip Code
General Property Lo	ocation:				
Quarter	Section	Township	Range	Tow	nship Name
Parcel Identification	No				
Complainant Inform	nation:				
Name			Address, City,	State, Zip	Phone
Complain	ant Signature			Date Sign	 ned
Violation Information					
Conditions:					
Date Last Observed:	·				
This com	plaint form ne	eds to be co	mplete, includi	ng signature, in	order to be investigated.
		For C	Office Use Only		
Complaint Number: _					
Date Received: Code Section Violati	on:		Received by	y:	
Action Taken:					
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Action raken.					
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