

**CITY OF CHEHALIS  
COMMUNITY SERVICES DEPT.  
748-0271 FAX: 748-6993**

**NUISANCE ABATEMENT/ANIMAL  
CONTROL FORM--Do not use this form for  
suspected criminal activity; notify Police  
Department (748-8607) directly.**

**OFFICE USE ONLY:**

Received by: \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_

Person [ ] Phone [ ]

Demeanor: OK[ ] Ab[ ] Af[ ] La[ ]

Civil: Yes[ ] No[ ]

**PERSON FILING COMPLAINT:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/St/Zip: \_\_\_\_\_

Phone No: \_\_\_\_\_

**LOCATION OF COMPLAINT:**

Owner (if known): \_\_\_\_\_

Site Address: \_\_\_\_\_

Witness (if any): \_\_\_\_\_

Date/Time Occurred: \_\_\_\_\_

**\*REPORTS CANNOT BE PROCESSED WITHOUT AN ADDRESS FOR THE LOCATION OF COMPLAINT**

**SPECIFIC COMPLAINT/ALLEGATION IN DETAIL:** \_\_\_\_\_

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

**MAKE SURE YOU HAVE THE ADDRESS FOR THE LOCATION OF COMPLAINT\***

**THE STATEMENTS ABOVE ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE**

**I understand that I may be required to testify in a court of law regarding the statement above**

SIGNED: \_\_\_\_\_ (WITNESS:) \_\_\_\_\_

DOB : \_\_\_\_\_

BECAUSE OF THE VOLUME OF COMPLAINTS FILED, AND THE TIME REQUIRED TO INVESTIGATE AND DETERMINE COMPLIANCE ON EACH ONE, YOU MAY NOT BE CONTACTED ABOUT THE RESULTS OF THE INVESTIGATION INTO YOUR COMPLAINT. YOU CAN ASCERTAIN THE STATUS OF YOUR COMPLAINT BY CALLING 748-0271