ROCK RIVER TOWNSHIP

BLIGHT ORDINANCE VIOLATION COMPLAINT FORM

Attention: Township Supervisor

P.O. Box 195

Chatham, MI 49816

rockrivertwpsupervisor@outlook.com

Date Complaint Form Completed:
Person(s) Making Complaint:
Address(s) of Person(s) Making Complaint:
Person(s) or Property Allegedly Violating the Blight Ordinance:
Date or Dates of Alleged Violation:
Description of the Alleged Violation:

Return completed form to Rock River Township supervisor to the address above or to the Township Office attn. Township Supervisor.