



**KING CITY**  
CALIFORNIA

**BUILDING & SAFETY DEPARTMENT**  
**212 S. VANDERHURST AVE. KING CITY, CA. 93930**  
**(831) 385-3281 - FAX # (831) 385-6887**

**BUILDING CODE ENFORCEMENT COMPLAINT FORM**

(\* AREAS - REQUIRED INFORMATION TO PROCESS COMPLAINT)

ASSESSOR'S PARCEL # OF COMPLAINT: \_\_\_\_\_

\*ADDRESS OF COMPLAINT: \_\_\_\_\_

PROPERTY OWNER(S) NAME: \_\_\_\_\_

PROPERTY OWNER(S) ADDRESS: \_\_\_\_\_

**\*DETAILS OF COMPLAINT: (USE ADDITIONAL SHEETS OF PAPER IF NEEDED)**

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**STAFF NOTES:**

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PREVIOUS CASES: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DATE RECEIVED: \_\_\_\_\_ TIME: \_\_\_\_\_ COMPLAINT TAKEN BY: \_\_\_\_\_ PHONE #: \_\_\_\_\_

REFERRED TO:  Building Department  Public Works  Police Dept.  
 OTHER (SPECIFY): \_\_\_\_\_

DATE REFERRED: \_\_\_\_\_ REFERRED BY: \_\_\_\_\_

**\*CONFIDENTIAL: THIS INFORMATION WILL NOT BE RELEASED PER EVIDENCE CODE 1040 B (2)**

\*COMPLAINANT'S NAME: \_\_\_\_\_

\*COMPLAINANT'S ADDRESS: \_\_\_\_\_

\*HM #: \_\_\_\_\_ \*WK #: \_\_\_\_\_ \*OTHER: \_\_\_\_\_

TYPE OF COMPLAINT:  ZONING  BUILDING  GRADING  COMBINED: \_\_\_\_\_  
(CHECK ONE) (LIST ALL TYPES)

PLANNING AREA: \_\_\_\_\_ ZONING DISTRICT: \_\_\_\_\_

DATE OPENED: \_\_\_\_\_ OPENED BY: \_\_\_\_\_ ASSIGNED TO: \_\_\_\_\_ CASE #: \_\_\_\_\_