



**RENTAL HOUSING
COMPLAINT FORM
CITY OF GROTON**

Building & Zoning Department

295 Meridian Street Groton, CT 06340
Telephone 860-446-4104

Date of Complaint: _____

Complaint #: _____

Nature of Complaint:

Rental Housing

Building Violation

Blight

Zoning

Other; description _____

Property location: _____

Owner of Record/Property Manager: _____

Owner of Record/Property Manager Address: _____

Owner/Property Manager Telephone #: _____ Email address: _____

Details: _____

(If more space is needed please attach an additional sheet)

Name of Complainant: _____

Address of Complainant: _____

Complainant's Telephone #: _____ Email address: _____

Complainant's signature: _____

For Office Use Only:

Verification Inspection Date: _____

Violation(s): _____

Comments: _____

Follow up with Complainant: _____

Inspected by: _____