Town of Collbran
Code Enforcement Concern Form

Name of person/entity filing concern:

Address and Phone # of person/entity filing concern:

Please describe the grievances in as much detail as possible. Include time, place and any damage that was caused.

Nature of Code Enforcement Concern:

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Would you like this complaint to be discussed at the next board meeting? _____
Please note that you may be required to attend that board meeting.