



Inspection & Zoning Department

W194 N16660 Eagle Drive, Jackson, WI 53037

www.villageofjacksonwi.gov

P: 262.677.9696

PROPERTY MAINTENANCE COMPLAINT FORM

(Incomplete forms cannot be accepted.)

COMPLAINANT INFORMATION *(Print)*

** Indicates REQUIRED Information*

***Name:** _____

***Address:** _____

***Email Address:** _____

***Phone Number:** _____

PROPERTY OF CONCERN INFORMATION *(Print)*

** Indicates REQUIRED Information*

***Address:** _____

Owner Name(s): *(if known)* _____

****Briefly Explain the nature of the complaint. Provide enough information to assist in locating the issue or area of concern:***

NOTICE: *Anonymous complaints cannot be accepted as they do not contain the necessary credibility to provide probable cause. All information provided above is a public record. While the Village does not automatically share this information, it may be obtained through a public records request as mandated by Wis. Stats. 19.31.*

Complainant Signature: _____

Date of Complaint: _____