

ILLEGAL DUMP COMPLAINT FORM

CITY OF SPOKANE CODE ENFORCEMENT

808 W SPOKANE FALLS BLVD

BOX 165

SPOKANE WA 99201-3333

(509)625-6083 FX: 625-6802

DATE: _____

RECEIVED BY: _____

CITY
COUNTY

RIGHT OF WAY
PRIVATE PROPERTY

LOCATION: _____

WHEN DID ILLEGAL DUMP OCCUR? DATE: _____ TIME: _____

DESCRIPTION AND AMOUNT OF ITEMS FOUND: _____

MOST CURRENT ID FOUND: _____ DATE ON ID: _____
NAME: _____ PHONE: _____
ADDRESS: _____

VEHICLE DESCRIPTION: _____
COLOR: _____ MAKE/MODEL: _____
LICENSE NUMBER: _____ STATE: _____

SUSPECT DESCRIPTION: _____

CALLER INFORMATION: _____
NAME: _____ PHONE: _____
ADDRESS: _____

RELATIONSHIP TO PROPERTY:
 OWNER TENANT OTHER _____

ADDITIONAL COMMENTS: _____
