

FREMONT COUNTY ENVIRONMENTAL HEALTH

2014 290th Ave
Sidney, Ia 51652

Environmental Health Specialist Phone:
(712)-313-0200
FAX: (712)-374-2222

NUISANCE COMPLAINT

1. Nature of the nuisance the Board of Health should address:

2. Location of premises on which the nuisance condition exists:

3. Name and address of owner of premises on which the nuisance exists:

4. Name and address of person in control or possession of premises:

5. Period, including date of latest observations, that the condition was seen:

6. Name and address of person believed responsible for the nuisance condition:

I have personal knowledge of the condition of which complaint is made and will cooperate with the Fremont County Board of Health to the extent of giving evidence requested to remedy the nuisance conditions. The above statements are true to the best of my knowledge and belief.

Dated this _____ day of _____ 20____.

Complainant: _____ Telephone No. _____

Address: _____

After having investigated the above complaint, the following findings and recommendations are submitted:

Findings: _____

Recommendations:

Dated: _____ County Environmental Specialist _____