



CITY OF SOLANA BEACH

CODE COMPLIANCE COMPLAINT FORM

1. All Reporting Party contact information will be kept confidential unless ordered to be released by court order or by permission of the reporting party. Please note that the reporting party's identity may be revealed as a necessary part of legal proceedings.

2. This form must be filled out completely and signed by Reporting Party.

Reporting Party's Name _____

Reporting Party's Address _____

Reporting Party's Phone No. _____

Reporting Party's Email _____

COMPLAINT INFORMATION

Location of Alleged Violation _____

Property Owner's Name _____

Property Owner's Address _____

Date _____

Tenant's Name _____

Tenant's Phone No. _____

Describe violation and give supporting evidence:

(Please attach additional documentation as needed)

Reporting Party certifies that the information set forth above is true and correct of Reporting Party's own knowledge.

Signed: _____

Dated: _____

*If you have any questions please call Code Compliance at (858) 720-2403 or email CodeCompliance@cosb.org

City Use Only

Received by:

Date:

Assigned to:

Case No.