

◆ CITY OF BLACK DIAMOND ◆

PO Box 599 ~ 24301 Roberts Drive
Black Diamond, WA 98010
Phone 360.886.2560 Fax 360.886.2592

CODE COMPLIANCE AND ENFORCEMENT Complaint Form

CITIZEN NAME: _____ PHONE: _____

MAILING ADDRESS: _____

SIGNATURE: _____ DATE: _____

☐ I WISH TO REMAIN ANONYMOUS ☐ PLEASE NOTIFY ME OF ACTION TAKEN

CODE VIOLATION CONCERN (provide details: address, owner's name, parcel #, etc)

CITY CONTACTED BY: ☐ Phone ☐ Letter ☐ E-Mail ☐ In-Person

COMMUNITY DEVELOPMENT PERSONNEL MUST RESPOND WITHIN 5 WORKING DAYS

RESPONSE OR ACTION TAKEN:

By: _____ Date: _____

RESPONDED TO CITIZEN BY: ☐ Phone ☐ Letter ☐ E-Mail

The information contained herein is confidential and will not be divulged to the public except pursuant to court order.