

City of Dayton 111 S. 1st. Street, Dayton, WA 99328 Office 509.382.2361 Fax 509.382.2539 Web www.daytonwa.com

Date: _____

Subjects name and/or subject propert	y owner's name:
If specific property, please provide ac	ddress and/or legal description of property:
Nature of complaint, Concern and/or	Compliment (add additional sheet if needed):
p.	
I certify and/or declare under penalty that the foregoing statements are true	of perjury under the laws of the State of Washington and correct. (RCW 9A.72.085)
Signature	Date
Print Name (Continue on to next page)	

Mailing Address	
ra Erbi - Kumalaatutta raa oo oo .	
Physical Address	
Date Received	Received by
CITY OF DAYTON USE ONL	Y
Violation(s) of Dayton Municipal Code:	
	76135
Findings of Onsite Inspection (attach photographs if available):	
Enadolo to the address to the action of the second of the	ACTOR STORY WYSHER STORY
Action(s) taken:	
Additional Comments:	
Report back to Complainant:	ne and established in the
[] Copy to Mayor [] Copy to other:	
Employee Signature	Date
STATEMENT OF COMPLIMENT/CONCERN/COMPLAINT 03/2015	