



**CITY OF MANCHESTER, TENNESSEE**

**DEPARTMENT OF HEALTH AND CODE**

200 W. Fort Street  
Manchester, TN 37355  
931-723-1464  
Fax: 931-728-8296

**PROPERTY COMPLAINT FORM**

- Complaint
- Routine Inspection
- Other
- Dwelling
- 17-102 (Abandoned vehicle, yard, etc)
- Vacant

Property location in violation:

Owner: \_\_\_\_\_

Address: \_\_\_\_\_

Occupant: \_\_\_\_\_

Address: \_\_\_\_\_

Violation of Code/Codes: \_\_\_\_\_

Inspection requested by: \_\_\_\_\_

Specific Complaint: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Remarks: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Inspection:  Accepted  Rejected  Follow-up Inspection

Date: \_\_\_\_\_ Date: \_\_\_\_\_ Date: \_\_\_\_\_

Violation to be taken care of by: \_\_\_\_\_  
Date

\_\_\_\_\_  
Health and Codes Dept.