

**CITY OF CANTON
CODE ENFORCEMENT COMPLAINT FORM**

201 N. Buffalo
Canton, TX 75103

Please complete this form and return it in person or by mail.

COMPLAINT OR CODE VIOLATION INFORMATION	
Street Address or Location of Complaint/Violation:	
Additional Location Information:	
Name of Property Owner, if known:	
Description of Complaint/Violation (Provide as much detail as possible):	

REPORTING PARTY INFORMATION This section is optional. You may remain anonymous.	
Name:	Phone:
Mailing Address:	Email:

Signature of Reporting Party:	Date:
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