



CITY OF LINDSAY
REPORT OF NEGATIVE CONDITION

Reporting employee _____ Department _____ Date Reported _____

Location of problem _____ Address (if possible) _____

Person to contact for further information _____ Address _____

Home Phone _____ Cell Phone _____

Nature of problem:

- | | |
|-----------------------------------------------------------|--------------------------|
| Residential Overcrowding | Unpermitted Construction |
| Illegal housing conversions | Property nuisances |
| Untidy properties, fire hazards or attractive nuisances | Improper signage |
| Improperly maintained commercial landscaping | Illegal parking |
| Excessive residential noise and or vehicles | Untidy trash |
| Illegal use of sidewalks by bicyclists and skate boarders | Other _____ |

Description of Problem: _____

Action Taken: _____

Committee Review: _____

Action Taken: _____

Routed To:

- | | | | | |
|---------------|------------------|----------------|--------------------|------------------|
| City Manager | Code Enforcement | Animal Control | Building Inspector | Police |
| City Services | Finance | Fire | Planning | other _____ |
| | | | | City Attorney |
| | | | | Date Sent: _____ |

Problem was solved: Yes No Other _____

Followed up by : _____ Date: _____