



City of Arcata Code Enforcement COMPLAINT FORM

736 F Street
Arcata CA 95521

IMPORTANT: Provide as much detail as possible
Items marked with an asterisk (*) must be completed
If you do not have some information, be sure to request help from City staff
Property must be located within the City of Arcata

* Date _____

* Address of Suspected Violation _____

City _____ APN (Parcel Number) _____

* Complainant's Name _____ * Phone _____

Are you a Renter or Tenant? Yes No

* Property Owner's Name _____ * Phone _____

* Address _____

* City _____ * State _____ * Zip _____

* Details of Complaint (be specific)

* Are there any known or suspected hazards at this location? (Such as dangerous or unstable residents, dogs, criminal activity, etc.) Yes No Unknown

If YES, please explain in detail _____

Received by: _____ Date _____