Jackson County Health Department

1715 Lansing Ave, Suite 221 • Jackson, Michigan 49202 •
Phone (517) 788-4433 • FAX (517) 788-4616

NUISANCE COMPLAINT FORM

Location of the Nuisance:

Address	City/Township

Person(s) responsible for nuisance:

Name	Address	Phone

Complainant Information:

Address	City/Township
Name (Print)	**Phone**

THE SPECIFIC COMPLAINT:

Complainant's Signature: Date

Your name will not be used for the investigation. However, it is a matter of public record.

An Equal Opportunity Employer