

**TOWN OF STAFFORD**  
**COMPLAINT CHECKLIST**  
**(585) 344-1554 EXT. 7**

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

Complaint type: \_\_\_\_\_ Grass & Weeds

\_\_\_\_\_ Junk Vehicle

\_\_\_\_\_ Pool Violation

\_\_\_\_\_ Garbage & Debris

\_\_\_\_\_ Unsafe Building

Location: \_\_\_\_\_

\_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

Date of re-inspection: \_\_\_\_\_

Comments: \_\_\_\_\_