

**FRANKLIN TOWNSHIP  
LUZERNE COUNTY  
NUISANCE ORDINANCE  
REGISTRATION OF COMPLAINT**

DATE: \_\_\_\_\_

COMPLAINT REGISTERED BY: NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

COMPLAINT AGAINST: NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

NATURE OF COMPLAINT: DESCRIBE IN DETAIL

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF PERSON FILING COMPLAINT

\_\_\_\_\_  
SIGNATURE OF OFFICIAL  
RECEIVING COMPLAINT

/\_\_\_\_\_  
TITLE

**THIS FORM MUST BE FILLED OUT COMPLETELY AND SIGNED BEFORE ANY ACTION WILL BE TAKEN.**

TOWNSHIP USE

DATE RECEIVED: \_\_\_\_\_ DATE ACTION TAKEN: \_\_\_\_\_

TYPE OF ACTION TAKEN: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_