



MARION COUNTY ZONING DEPARTMENT

Melissa Poffenbarger
214 E. Main St., Suite 2
Knoxville, IA 50138

FORMAL COMPLAINT FORM

Address Being Reported: _____

Name of Reported Parcel Owner: _____

Nature of the Complaint: _____

Complainant Name: (PLEASE PRINT) _____

Phone Number: _____

The information I provide WILL be considered public record. Under Iowa Law all complaints that are received by the County, are subject to requests under the Freedom of Information Act. As such this complaint and any follow up reports generated by this report and may be disseminated to third parties.

Verification of Complaint

Complainant Signature

FOR OFFICE USE ONLY

Date Received: _____ Received By: _____

Action Taken: _____

Complaint Confirmed (Action to be Taken) Complaint Unfounded Date Closed: _____

FOR OFFICE USE ONLY

Step 1. Can complaint be handled by local city ordinances?

YES-refer to applicable city official: _____

NO-continue with process

Date_____ **Initials**_____

Step 2. Visit Site **Date**_____ **Initials**_____

Step 3. Do violations exist? Make a final determination whether conditions identified, in some reasonable way that are defined and enforceable by Marion County Ordinance.

Step 4. If violations exist:

a. Contact responsible party by written notification and outline violations and request a timely response to abate the condition. Be certain to keep detailed/precise documentation of dates and contacts.

Date_____ **Initials**_____

b. If no response is received, prepare a more detailed request in writing. Outline the observations and reasons why the conditions are considered to be a violation or threat to the public's /community's health. Give a specific time limit for a response and request a plan for correction, but with the additional statement, that the case will be referred to the county attorney if no response is received. Keep a copy of everything, and be prepared to forward copies of documentation and evidence to county attorney in case legal action becomes necessary.

Date_____ **Initials**_____

c. If still no response, return to site with previous documentation and photos to confirm existence of conditions. Again, carefully document and photograph findings. Prepare documentation, photos, etc. and meet with the county attorney to request legal action.

Date_____ **Initials**_____

County Official

Date