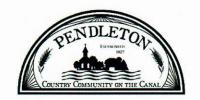
Town of Pendleton Building Department



6570 Campbell Blvd. Lockport NY 14094 716-625-8833 Ext. 115 & 114 www.pendletonny.us

COMPLAINT FORM

Address of Complaint:	
Nature of Complaint: (please provide as	much detail as possible)
	are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law of
NOTICE: False statements made herei	are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law of
NOTICE: False statements made herei	are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law of * Complainant:
NOTICE: False statements made herei New York State.	* Complainant:(print)
NOTICE: False statements made herein New York State. *Sworn to before this	* Complainant:(print) * Street:
NOTICE: False statements made herein New York State. *Sworn to before this	* Complainant:
NOTICE: False statements made herein New York State. *Sworn to before this	* Complainant:
NOTICE: False statements made herein New York State. *Sworn to before this	* Complainant:
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NOTICE: False statements made herein New York State. *Sworn to before this	* Complainant:
NOTICE: False statements made herein New York State. *Sworn to before this	* Complainant:

* Required fields