STAT OF THE MONT	-	CARSON CITY COMPLAINT REPORT			
	1 Par				
*		108 E. PROCTOR ST.			
11 1858	. A.	CARSON CITY, NV 89701			
April Carlins and	21232	PHONE - ((775) 88	87-2310	FAX - (775) 887-2202
Name of Person Filing Co	omplaint:				Phone Number:
Mailing Address:				Email Address:	
City:				State:	ZIP Code:
Location of Complaint:					
Complaint:					
If you contacted any oth	er City Official ab	oout this complaint,	please indicat	e who was contacte	ed and what were the results:
Have you contacted the	source of the con	cern to try to solve	the problem y	ourself?	
If yes, what were the res	sults:				
			0, that it is unla	wful to report a misc	demeaner violation knowing such report to be false and th
by doing so a person is gu If a citation is issued as a			auested to test	ify in court.	
Print Name:					
Signature:				Date:	
>	REFERR				Action Taken:
Building	Health	Swr Util	Env Ctrl		
Fire Planning	Wtr Util	Streets	Eng.		
	Sheriff	Animal Ctrl	Bus Lic		
Airport Auth	Other				
O Investigator:					
C First Date of Inspe	ction			-	
FIIST Date of thspe	LUUI .				