CITY OF CAPITOLA
420 CAPITOLA AVENUE
CAPITOLA CALIFORNIA 95010
TELEPHONE/ TDD 831 475-7300
FAX 831 479-8879

BUILDING/ZONING COMPLAINT FORM

DATE: _____

VIOLATION ADDRESS: _____

OCCUPANT/BUSINESS OWNER:_____

PROPERTY OWNER: _____

COMPLAINANT NAME: _____

MAILING ADDRESS: _____

PHONE #: _____

CHECK THE BOX IF WOULD LIKE YOUR IDENTITY TO BE KEPT CONFIDENTIAL: ☐

DESCRIPTION OF COMPLAINT:

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