



COUNTY OF DUPLIN
BUILDING INSPECTIONS DEPARTMENT
PO BOX 950
KENANSVILLE, NC 28349
PHONE: (910) 296-2124 FAX: (910) 296-2166

COMPLAINT REPORT FORM

Your Name: _____

Site Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____

COMPLAINT REGISTERED AGAINST:

Property Owner: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____

DESCRIPTION OF COMPLAINT:

Is Property A Rental: _____ Are You The Tenant: _____

How Long Has This Problem Existed: _____

If You Are The Tenant Did Problem Exist When You Moved In: _____

By signing below I attest under penalties of perjury that the above statements are true to the best of my knowledge and belief.

Signature _____

Date _____ Print Name _____