



Town of Athol

584 Main Street – Room 4 – Athol – Massachusetts – 01331

Voice: (978) 249-3834 Fax: (978) 249-3845

E-Mail: bldginsp@townofathol.org

**Office of the
Inspector of Buildings**

GENERAL COMPLAINT FORM

This is a formal request for enforcement of an alleged violation of:

☐ Building Code ☐ Zoning By-Law ☐ Plumbing Code ☐ Gas Code

☐ Electrical Code ☐ Miscellaneous

Please notify me, in writing, of any action or refusal to act on my request for enforcement. The following are the facts in the case:

Location of Property involved: _____

Owner of Property, if known: _____

Owner's mailing address, if different: _____

Alleged Violation(s)

Section(s) _____ : _____ : _____ : _____ : _____ : _____

Nature and Details of alleged violation(s) (may use back of form if necessary)

Date(s) of alleged violation(s) _____

Complainant(s): _____

Complainant Address: _____

Home Phone: _____ Work Phone _____

I qualify as an aggrieved party and do believe that the above facts are true. I understand that if it is necessary for the Town of Athol to institute legal action in the courts, I hereby agree to testify as a witness on behalf of the Town of Athol, Massachusetts.

Signature

Date