

# ENFORCEMENT COMPLAINT ENQUIRY



Your Full Name: \_\_\_\_\_

Your Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Post Code \_\_\_\_\_

Your Telephone No: \_\_\_\_\_

## DETAILS OF COMPLAINT

Exact location

Description, e.g. building works, extension, business activity etc.

Date building work/activity start \_\_ \_ / \_\_ \_ / \_\_ \_

Name/address/phone numbers (if known) of the owner/occupier/builder etc.

Further to details as to the effect the building/activity is having on you and local amenities, e.g. noise, traffic, smells, overshadowing, etc.

Signed

Date: \_\_ \_ / \_\_ \_ / \_\_ \_

*Please return the completed form to:*

The Planning Enforcement Officer  
Civic Offices  
HAVANT  
Hants  
PO9 2AX