

Washington County Health Department
Environmental Health Services
806 Martinsburg Rd., Suite 100
Salem, IN 47167
812-883-5603 ext. 2004

COMPLAINT and INSPECTION REPORT

Date Complaint Received _____ Time _____ Complaint No. _____

Parcel # _____ Township _____

Type of Complaint:

___ Sewage - IC 410-6-8.3

___ Open Burning - IC 4-1-2

___ Dumping - IC 13-30-2-1

___ Waste Water - Rule 410 IAC 6-8.3, Sec. 52

___ Unfit for Human Habitation - IC 16-41-20

___ Other - _____

Description/Comments:

Name of Business, Establishment, Owner:

Name: _____

Address: _____

City: _____, Indiana Zip: _____

Complainant Information:

First Name _____ Last Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Type: Home ___ Work ___ Mobile ___

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INSPECTION DATE: _____ TIME: _____

INSPECTION NOTES:

Verified in person by:

Chris Boling
Environmental Health