



CITY OF ELKINS, WEST VIRGINIA  
CODE ENFORCEMENT DEPARTMENT  
401 Davis Ave. Elkins, WV 26241 / 304-636-1414 Ext. 1431  
**REQUEST FOR INVESTIGATION**  
email: pisner@cityofelkinswv.com

I hereby request an investigation of the public health hazard or nuisance described below:

Location (be specific):

Person(s) responsible for the condition:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone #: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone #: \_\_\_\_\_

How long has this condition existed?

Have you reported this condition to the person responsible?

☐ Yes

☐ No

Has this condition previously been reported to the City of Elkins?

☐ Yes

☐ No

Has this been reported to another agency?

☐ Yes

☐ No

\*If Yes, name of agency reported to:

By making this Request for Investigation, I acknowledge that the City of Elkins may take all necessary steps consistent with the appropriate laws to investigate and effect correction if such is warranted. Such action may involve referral to other agencies or legal action that may require the need for my court appearance and testimony to collaborate the conditions I have stated in this complaint.

Person Requesting Investigation:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

Signature: \_\_\_\_\_  
Date: \_\_\_\_\_  
Email: \_\_\_\_\_

FOR CITY OF ELKINS USE:

COMPLAINT	YES	NO	DATE	ACTION TAKEN	YES	NO	DATE
Investigated				Written Notice			
Previously Investigated				Verbal Notice			
Justified				Other:			

CONDITION FOUND:

COMPLAINT	YES	NO	DATE	COMMENTS:
Corrected or Abated				
Referred				
Follow-up Pending				
Code Enforcement Officer Signature:				Date: