



# Township of South Orange Village

76 South Orange Avenue  
South Orange, N.J. 07079

Return to Health Department

DATE: \_\_\_\_\_

TIME: \_\_\_\_\_

## HEALTH COMPLAINT INVESTIGATION RECORD

PROPERTY ADDRESS

OWNER/SUPER NAME

TELEPHONE NUMBER

COMPLAINANT'S NAME

ADDRESS

TELEPHONE NUMBER

COMPLAINANT NOTIFIED HEALTH DEPARTMENT BY:

PHONE

IN PERSON

LETTER

RECEIVER OF COMPLAINT: \_\_\_\_\_

1. Mold \_\_\_\_\_

2. Infestation:

Roaches

Mice

Rats

Other \_\_\_\_\_

3. Garbage:

Not Contained

Not Collected

Other \_\_\_\_\_

4. Poison Ivy: (please state location) \_\_\_\_\_

5. Barking Dog: (please state location) \_\_\_\_\_

6. Dog Bite: \_\_\_\_\_

7. Dog at Large: (please state location) \_\_\_\_\_

8. Dog Defecation: (please state location) \_\_\_\_\_

9. Food Complaint: \_\_\_\_\_

Restaurant: \_\_\_\_\_

10. Other: \_\_\_\_\_

### INSPECTORS REPORT

DATE

INSPECTOR

TIME

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____