

CITY OF NEW BERN

Building/Zoning/Nuisance Complaints

(Complete and return to City Inspections Department at 248 Craven Street,
corner of Craven & Pollock Streets or PO Box 1129, New Bern, NC 28563)

A. Concerned citizen: Name _____
Address _____
Telephone _____

B. Complaint address: _____
Owner's name, if known _____

C. Nature of complaint: _____

Date: _____ Signature of concerned citizen: _____

***** *For Office Use Only. Do not write below this line.* *****

Date of Inspection: _____ Signature of Inspector: _____

Type of Complaint: [] Building [] Zoning [] Nuisance

Comments/Remedy: _____

