

City of Paullina  
127 S Main St

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Paullina, IA 51046

712-949-3428

## City Nuisance Complaint Form

Please complete the following form so that the city can properly investigate and determine if the city needs to take action.

Your Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Circle Complaint Sections:

1. Building/Unsafe Structure.
2. Junk Vehicles.
3. Offensive Smell.
4. Garbage.
5. Junk in Yard.
6. Fence.
7. Weeds/Overgrowth
8. Trees.
9. Signage or Right of Way Use.
10. Other: \_\_\_\_\_

\*Code/Ordinance Section(s): \_\_\_\_\_

Address of Alleged Nuisance: \_\_\_\_\_

Description of Violation/Nature of Complaint. PLEASE BE SURE TO INCLUDE AS MUCH  
DETAIL AS POSSIBLE – LOCATION, HOW LONG HAS THIS BEEN HAPPENING, HOW  
YOU FEEL THE NUISANCE CAN BE CORRECTED, ETC. (You may use additional sheets  
of paper if needed.)

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\*PLEASE REMEMBER THAT THIS IS A REQUEST TO HAVE A CITY OFFICIAL LOOK INTO THE POSSIBLE VIOLATION AND THAT THIS IS NOT THE INSTRUCTIONS THE CITY IS REQUIRED TO FOLLOW. WE WILL CONSIDER YOUR RESOLUTION DETAILS; HOWEVER, THE CITY OF PAULLINA RESERVES THE RIGHT TO RESOLVE ANY COMPLAINT AS THE CITY SEE FIT.\*

Citizen's Signature:

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FOR OFFICE USE ONLY:

DATE RECEIVED: \_\_\_\_\_ IN VIOLATION: YES/NO DATE LETTER SENT: \_\_\_\_\_

DATE COMPLETED: \_\_\_\_\_ VERIFIED BY: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

COMMENTS BY STAFF:

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