

APACHE COUNTY
Complaint/Corrective Action Form
Zoning Ordinance Article 13

Complainant Name:			
Mailing Address:		City:	State: Zip:
Physical Address:		City:	State: Zip:
Home Phone:	Cell Phone:	Email address:	
Date/Time Issue First Observed:	Property Owner's Name:	A.P.N	
Physical Address:		Mailing Address: (if known)	
Narrative:			
Signature:			Date:
All information you submit to Apache County in this process will become public record. By filing this form, you acknowledge that YOU HAVE NO RIGHT TO CONFIDENTIALITY in the information disclosed.			
Mail to: Apache County Community Development P.O. Box 328 St. Johns, AZ 85936 Or email to planning@co.apache.az.us			
Office Use Only:			
Date/Time Received:	Received by (Employee First Initial, Last Name or ID #):	Employee Department:	
How Received: In Person <input type="checkbox"/> By Phone <input type="checkbox"/> By Mail <input type="checkbox"/> By Email <input type="checkbox"/>		Forwarded to (Name, Department):	Date Forwarded to Department:
Other :			
Action Taken:			
Signature of Department Head:		Date Returned to ACCD:	Date Received by ACCD: