



CITY OF OCEANSIDE  
**CODE ENFORCEMENT COMPLAINT FORM**

Please use this form to file a code enforcement complaint. This information will be kept confidential unless ordered to be released by court order or by permission of the reporting party. **Anonymous complaints or incomplete forms will not be investigated. PLEASE COMPLETE SECTIONS 1 & 2.**

**SECTION 1: COMPLAINT INFORMATION**

Today's Date:	_____ / _____ / _____
<b>Violation Address:</b>	_____
Description of Violation:	_____ _____

**SECTION 2: REPORTING PARTY INFORMATION**

Name: <b>(required)</b>	_____
Phone No.: <b>(required)</b> (      )	_____
Address: (optional)	_____
<input type="checkbox"/> Please contact me	<input type="checkbox"/> I do not wish to be contacted

**WHEN COMPLETED:**

**Mail to:**

City of Oceanside  
 Code Enforcement Division  
 602 Civic Center Drive  
 Oceanside, CA 92054

**Drop off at:**

Code Enforcement Counter  
 602 Civic Center Drive  
 Oceanside, CA 92054

**Fax to:**

Code Enforcement Division  
 (760) 967-1887

This complaint will be assigned to Code Enforcement personnel. Unless otherwise requested, you will be contacted to confirm receipt of this request and will be contacted periodically with case updates. If you have any questions please call the Code Enforcement office at (760)435-3945.

<i>For City Use Only</i>			
Received by:	Date:	Assigned to:	Case No.