

Code Enforcement Complaint Form

Mail To:

City of Gulfport
Division of Urban Development
Code Enforcement Division

Physical Mailing Address

P.O. Box 1780
Gulfport, MS 39502

Contact Information:

Phone: 228-868-5718

FAX: 228-214-4487

Date: ____/____/____

(Date/Time Stamp)

Person Making Complaint: _____

Address of Complainant: _____

Complainant Phone Number: _____

Complaint Information:

Address of Property: _____

Owner of Property (If Known) _____

NATURE OF COMPLAINT: (Check appropriate box)

- | | | |
|--|--|--|
| <input type="checkbox"/> Overgrown Property | <input type="checkbox"/> Illegal Dumping | <input type="checkbox"/> Accumulation of Trash/Debris |
| <input type="checkbox"/> Unsafe Structure | <input type="checkbox"/> Vacant Structure | <input type="checkbox"/> Improper Disposal of Refrigerator(s) |
| <input type="checkbox"/> Vagrant(s) Living on Property | <input type="checkbox"/> Inoperable Vehicle(s) | <input type="checkbox"/> Infestation (Insects/ Rodents/Snakes) |
| <input type="checkbox"/> Unsanitary Pool | <input type="checkbox"/> Unsecured Pool | <input type="checkbox"/> Illegal Business |
| <input type="checkbox"/> Electricity Shutoff | <input type="checkbox"/> Gas Shutoff | <input type="checkbox"/> Water Shutoff |

Miscellaneous/Other: _____

Case ID# _____

Ward _____