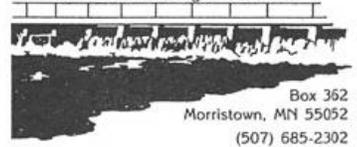


# Code Compliance Form

**City of Morristown**

IN SOUTHERN MINNESOTA LAKES REGION

*Best Little Town By A "Dam Site"*



## A. Complainant Information

Name:	I would like to remain anonymous: <input type="checkbox"/> Yes <input type="checkbox"/> No
Street Address:	City, State, Zip Code:
Cell Phone:	Email Address:
Signature:	Date:

*Tennessee Warning*

*Data that identifies individuals who report violations of laws concerning the use of real property are classified as confidential data under the Minnesota Government Data Practices Act. The City of Morristown may collect such data from complainants. The identities of individuals who register complaints about the use of real property will not be provided to the public, but an individual who is potentially subject to criminal or civil penalties for an alleged violation may have the right to obtain the identities of complainants if their due process rights so require.*

## B. Code Violation Observed

Date Violation was Observed:	Section of City Code, if known:
Address of Violation:	City, State, Zip Code:
Description of the Violation Observed:	

**Submit to:**  
 City of Morristown  
 402 Division St S, P.O. Box 362  
 Morristown, MN 55052  
 admin@ci.morristown.mn.us

## To be Completed by City Department

### A. Confirmation of Code Violation

Form Received By:	Date Received:
Violation Address:	Violation Name:
<p>City Code Violation:</p> <p><b>ANIMAL</b></p> <p><input type="checkbox"/> Animal: 91.02(A) Dog Running at Large</p> <p><input type="checkbox"/> Animal: 91.04 Farm Animals in City</p> <p><input type="checkbox"/> Animal: 91.07 Habitual Barking</p> <p><input type="checkbox"/> Animal: 91.07(C) Lack of Feces Disposal</p> <p><b>BURNING</b></p> <p><input type="checkbox"/> Burning: 92.16(I) Dense Smoke Discharge</p> <p><input type="checkbox"/> Burning: 92.57 Failure to Obtain Permit</p> <p><input type="checkbox"/> Burning: 92.55 Fire Greater than 3 Feet</p> <p><input type="checkbox"/> Burning: 92.56 Prohibited Materials</p> <p><b>VEHICLE</b></p> <p><input type="checkbox"/> Vehicle: 71.09 Hinders Snow Removal</p> <p><input type="checkbox"/> Vehicle: 71.09 Obstruction to Traffic or Street Maintenance</p> <p><input type="checkbox"/> Vehicle: 92.20 Unlicensed/Inoperable</p> <p><input type="checkbox"/> Vehicle: 92.19(A)(1) Vehicle Obstruct Views on Streets</p>	
<p><b>BUILDING</b></p> <p><input type="checkbox"/> Building: 92.21(A) Poorly Maintained</p> <p><b>NUISANCE</b></p> <p><input type="checkbox"/> Nuisance: 92.16(E) Amass Refuse/Debris</p> <p><input type="checkbox"/> Nuisance: 92.18(W) Grass/Leaves on Street</p> <p><input type="checkbox"/> Nuisance: 92.18(A) Ice/Snow on Sidewalk</p> <p><input type="checkbox"/> Nuisance: 92.18(F) Noise that Disturbs</p> <p><input type="checkbox"/> Nuisance: 92.16(A) Vegetable Matter</p> <p><input type="checkbox"/> Nuisance: 92.38 Weeds/Grass</p> <p>OTHER: <i>explain</i></p>	
Violation Exists: <input type="checkbox"/> Yes <input type="checkbox"/> No	Violation: <input type="checkbox"/> Simple <input type="checkbox"/> Severe
Pictures Submitted: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Violation Verified By:	Date Verified:

## B. First Letter

Letter Sent to: <input type="checkbox"/> Homeowner <input type="checkbox"/> Renter	Date Letter Sent:
Appeal Received: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes. Date:
Violation Corrected: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes: Date Homeowner Confirmed:
	Date Maintenance Dept Confirmed:
	If no: <i>Send a second letter.</i>

## C. Second Letter

Fine Amount: \$100.00	Date Letter Sent:
Appeal Received: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes. Date:
Fine Amount Received: <input type="checkbox"/> \$0 <input type="checkbox"/> \$100 <input type="checkbox"/> \$200 <input type="checkbox"/> \$400 <input type="checkbox"/> \$800 <i>Check all that apply</i>	Check #:
Violation Corrected: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes: Date Homeowner Confirmed:
	Date Maintenance Dept Confirmed:
	If no: Date \$200 fine letter was sent:

## D. Third Letter

Fine Amount: \$200.00	Date Letter Sent:
Appeal Received: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes. Date:
Fine Amount Received: <input type="checkbox"/> \$0 <input type="checkbox"/> \$100 <input type="checkbox"/> \$200 <input type="checkbox"/> \$400 <input type="checkbox"/> \$800 <i>Check all that apply</i>	Check #:
Violation Corrected: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes: Date Homeowner Confirmed:
	Date Maintenance Dept Confirmed:
	If no: Date \$400 fine letter was sent:

### E. Fourth Letter

Fine Amount: \$400.00	Date Letter Sent:
Appeal Received: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, Date:
Fine Amount Received: <input type="checkbox"/> \$0 <input type="checkbox"/> \$100 <input type="checkbox"/> \$200 <input type="checkbox"/> \$400 <input type="checkbox"/> \$800 <i>Check all that apply</i>	Check #:
Violation Corrected: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes: Date Homeowner Confirmed: Date Maintenance Dept Confirmed: If no: Date \$800 fine letter was sent:

### F. Fifth Letter

Fine Amount: \$800.00	Date Letter Sent:
Appeal Received: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, Date:
Fine Amount Received: <input type="checkbox"/> \$0 <input type="checkbox"/> \$100 <input type="checkbox"/> \$200 <input type="checkbox"/> \$400 <input type="checkbox"/> \$800 <i>Check all that apply</i>	Check #:
Violation Corrected: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes: Date Homeowner Confirmed: Date Maintenance Dept Confirmed: If no: Date Public Hearing letter sent:

### G. Public Hearing

Total Fine Amount Owed:	Date Letter Sent:
Date Violator was Notified of Hearing:	
Action Taken by Council:	
List Any Follow-up that's Required:	