Town of Westminster
Building Department

11 South Street
Westminster, MA 01473

Michael A. Gallant, CBC
Building Commissioner

Phone: 978-874-7407
Fax: 978-874-7462
Email: magallant@westminster-ma.gov

COMPLAINT FORM

All complaints of zoning issues shall be submitted on a form prepared by the Building Department. All complaints shall be signed by the person(s) who initiate the complaint. Such signatures shall be accompanied by printed or typed names and their address and shall be legible. If not signed as required above, the complaint will not be considered to be valid.

If upon the examination of the complaint the building department cannot ascertain by viewing the property in question and using any related information that the Building Department has on file or at its use where in the case of a property line dispute relating to setbacks of permitted uses than it shall be the responsibility of the complainant(s) to provide such required information. I f the complainant(s) fails to provide the required information the complaint shall be considered frivolous.

ZONING BY LAW – SIGN BY LAW – BUILDING CODE COMPLAINT FORM

(Please print or type) Date: _____

Address of Complaint:

No._____Street: _____ Unit No._____

Owner or Premises: _____

Address: _____

City or Town: _____

Name of Complainant: _____

Address: _____

City or Town: _____

Nature of Complaint: (use back of form if necessary)

_____

_____

_____

_____

_____

Signature of Complainant: _____

The Building Department will make every effort to answer, in writing, to the complainant in fourteen (14) days or less the action being taken on the complaint.

Disposition of Complaint: _____

_____

_____

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_____

Building Official: _____