



TOWN OF GOSHEN
OFFICE OF THE
BUILDING AND ZONING INSPECTOR
41 Webster Avenue, Goshen, NY 10924
Phone: 845-294-6430 x 226

Date: _____

SBL: _____ - _____ - _____

Address in question: _____

Complaint/allegation:

The following information MUST be completed or we are unable to proceed with this complaint:

Name of Complainant: _____

Phone #: _____ Email: _____

Complainant's address: _____

Complainant's signature: _____

FOR OFFICE USE ONLY

Received by: _____ Date: _____ Date Entered into IPS: _____

Complaint #: _____

Comments / Action taken: _____

