



# Town of Ossipee, New Hampshire

Office of the Selectmen  
P.O. Box 67, 55 Main Street  
Center Ossipee, NH 03814  
Phone: (603) 539-4181  
Fax: (603) 539-4183  
[www.Ossipee.org](http://www.Ossipee.org)

## Formal Complaint Form

Location of Complaint: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Time: \_\_\_\_\_:\_\_\_\_\_ AM / PM

Statement of Complaint (attach additional sheets if necessary):

---

---

---

---

---

---

Name of Complainant: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_

*I understand that this complaint will be submitted to the Ossipee Zoning Enforcement Officer and may be the basis for an investigation. Further, I sincerely and truly declare and affirm that the facts contained herein are complete, accurate, and true to the best of my knowledge and belief. I declare and affirm that this statement has been made by me voluntarily without persuasion, coercion, or promise of any kind.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

---

*For Office Use Only*

Date Received: \_\_\_\_/\_\_\_\_/\_\_\_\_ On-Site Visit (date & time): \_\_\_\_/\_\_\_\_/\_\_\_\_:\_\_\_\_\_ AM / PM

Zoning Officer's Observation:

---

---

---

---

---

---

Resolution:

---

---

---

---

---

---