

Case Number: \_\_\_\_\_

## Mason County Investigation Report Form

Parcel Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Violation Site Address: \_\_\_\_\_

Property Owner(s): \_\_\_\_\_ Phone #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Tenant/Contractor/Operator on site: \_\_\_\_\_

Directions to Site: \_\_\_\_\_

Description of Concern: \_\_\_\_\_

*Under the provisions of the Public Disclosure Law, RCW 42.56.240, the complainant may indicate a desire for disclosure or non-disclosure of their identity. If non-disclosure is chosen, this portion of this form will not be released to the public unless this case is filed in court. If filed, your name will be disclosed if you are a witness in the case.*

**Mason County investigates possible violations on a complaint basis only. Therefore, the name of the person filing the complaint should be provided.**

**Please check one of the following:**

- Please do not disclose my identity. I understand that disclosure may be required by court order or if this matter goes to court.
- You may disclose my identity.

Name (please print): \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Signature of Complainant: \_\_\_\_\_ Date: \_\_\_\_\_

### THIS SECTION FOR MASON COUNTY USE ONLY

Complaint Received by: \_\_\_\_\_ Date: \_\_\_\_\_

Complaint Received by:  Phone  Email  Web Site  In Person

Department of Concern:  Building  Planning  Fire  Public Works

Environmental Health:  Solid  On-site  Wells  Food  Other

Investigation Date and Findings: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date Closed: \_\_\_\_\_ Reason Closed: \_\_\_\_\_ Initials: \_\_\_\_\_