

PIKE TOWNSHIP
Zoning Department
330-866-3433

INSPECTION DATE: _____ INSPECTION MADE BY: _____

CONDITIONS AT TIME OF INSPECTIONS: _____

CONTACT MADE: ___YES ___NO PHOTOS TAKEN? ___YES ___NO TAKEN BY: _____

NOTICE OF VIOLATION TO PROPERTY OWNER: ___YES ___NO DATE SENT: _____

RESPONSE OF PROPERTY OWNER: _____

REINSPECTION DATE: _____ PHOTOS TAKEN: ___YES ___NO BY: _____

REINSPECTION DATE: _____ PHOTOS TAKEN: ___YES ___NO BY: _____

REINSPECTION DATE: _____ PHOTOS TAKEN: ___YES ___NO BY: _____

REINSPECTION DATE: _____ PHOTOS TAKEN: ___YES ___NO BY: _____

RESULTS: _____ Case Closed Because of No Apparent Violation.
_____ Case Closed Based on Results of Contact or Follow-up.
_____ Progress Made—Extension of Time Granted/Re-inspect in _____ days.
_____ Forward Written Report to Trustees or S.C. Prosecutor----Date: _____
_____ Public or Court Hearing Date: _____

ADDITIONAL COMMENTS:

(Signature): _____