



**Tillamook County**  
**PUBLIC WORKS DEPARTMENT**  
*Department of Solid Waste*  
*Waste Prevention and Recycling*

503 Marolf Loop Road  
Tillamook, Oregon 97141  
PH (503) 815-3975  
FAX (503) 842-6473

Email: [recycle@co.tillamook.or.us](mailto:recycle@co.tillamook.or.us)  
[www.co.tillamook.or.us/gov/solidwaste](http://www.co.tillamook.or.us/gov/solidwaste)

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**Tillamook County Code Enforcement**  
**SOLID WASTE COMPLAINT**  
**Intake Form**

**Instructions:** It is important that you supply as much detail as possible. If you have any questions, feel free to call the Solid Waste Program Manager at 503-815-3975, 503 Marolf Loop, Tillamook, Oregon 97141.

Date: \_\_\_\_\_

Twp \_\_\_\_\_ Range \_\_\_\_\_ Section \_\_\_\_\_ Tax Lot \_\_\_\_\_

Location of Violation: (Address) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Nearest Cross Street: \_\_\_\_\_

Residents Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Is the resident a Renter/Tenant?  Yes  No  Unknown

Property Owners Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Property Owners Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Details of Complaint: (Be specific) \_\_\_\_\_

Are there any known or suspected hazards at this location? (i.e. dangerous or unstable residents, dogs, criminal activity, hazardous substances, etc.)  Yes  No  Unknown

If 'Yes', identify known or suspected hazard(s) in detail: (Be specific) \_\_\_\_\_

If you have photos, or other related information, that can be used as evidence of this violation, please submit them with this application. The submitted documentation will not be returned and will become part of the complaint file.

Complainant Name: (Optional) \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_