

## DISTRESSED PROPERTY COMPLAINT FORM

*If there is a blighted building in your neighborhood, complete this form and mail it to Office of the First Selectman, Town of Stonington, 152 Elm St., Stonington, CT 06378 or fax it to 860-535-1046. (If you have received this form via email, you may return it to [Selectmen@Stonington-ct.gov](mailto:Selectmen@Stonington-ct.gov)) The Distressed Buildings Coalition will conduct a site visit and, if the conditions meet the standards established by the Distressed Buildings Ordinance, the property owner will be cited. (If you wish to remain anonymous, simply omit your name and address below.) For more information contact Office of the First Selectman at 860-535-5050.*

Address of Distressed Property: \_\_\_\_\_ Date: \_\_\_\_\_

### Distressed Conditions (Check (√) all that apply)

Exterior windows or doors

- Broken or missing
- Boarded
- Other \_\_\_\_\_

Exterior portions of the building are damaged; deteriorating, collapsing, and/or leave interior open to weather

- Walls
- Roof
- Porches
- Chimneys
- Other \_\_\_\_\_

Foundation walls

- Damaged
- Collapsing
- Other \_\_\_\_\_

Property is a menace to public health, safety, or welfare

- Trash, litter, or garbage
- Abandoned cars
- Other \_\_\_\_\_

Condition of property interferes with use and enjoyment of other space within the building or in the neighborhood

- Yes. *Please describe* \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How long has property been in this condition? \_\_\_\_\_

Name of Person Making Report: \_\_\_\_\_

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

Email: \_\_\_\_\_

### **FOR OFFICE USE**

Initials of Town Enforcement Official \_\_\_\_\_