



# CITY OF OCEAN CITY

AMERICA'S GREATEST FAMILY RESORT

DEPARTMENT OF OPERATIONS AND ENGINEERING

## WORK ORDER

(For official use only) File Number: \_\_\_\_\_ Date: \_\_\_\_\_

Municipal Code  Construction Code  Zoning  Fire Police  Rec'd by: \_\_\_\_\_

**PLEASE COMPLETE THE FOLLOWING:**

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

Block: \_\_\_\_\_ Lot: \_\_\_\_\_ Qual: \_\_\_\_\_

Owner(s) Name: _____
Owner(s) Address: _____
Owner(s) City: _____ State _____ Zip _____
Owner(s) Phone Number: _____ Email _____

Complainant Name: \_\_\_\_\_

Complainant Address: \_\_\_\_\_

Complainant Phone Number: \_\_\_\_\_ Email \_\_\_\_\_

Complainant Willing to Testify in Court Regarding Complaint YES / NO

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

Describe Nature of Complaint: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Below For Official Use only*

Complaint Resolved by: \_\_\_\_\_

\_\_\_\_\_

Permit: \_\_\_\_\_

Rental Reg/Lic: \_\_\_\_\_

Smoke/CO: \_\_\_\_\_

Tax# of Units: \_\_\_\_\_

Photos Attached:        yes        no

Investigated by: \_\_\_\_\_

**COMPLETION DATE:** \_\_\_\_\_