



# City of Hillsboro, Ohio

Justin Harsha, Mayor • Brianne Abbott, Safety & Service Director

Building & Inspection Department

## REFERRAL FORM

Case number

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Referral Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

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

(Signature)

(Print or type name)

(Date)

Briefly Describe the Property Causing the Problem:


Is this rental property? \_\_\_\_\_ Manager's Name: \_\_\_\_\_ Manager's Phone: \_\_\_\_\_

Were you aware of this problem when you moved in? \_\_\_\_\_ How long has this problem existed? \_\_\_\_\_

Have you discussed this problem with the new owner? \_\_\_\_\_

What was the property owner's reaction? \_\_\_\_\_


Address of Property Causing the Problem:

(Street No.) (Street Name) (Zip Code)

Property Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

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

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