

such information.

## **BUILDING REGULATIONS CONTRAVENTION COMPLAINT FORM BUILDING CONTROL SECTION**

Theewaterskloof Municipality Head Office 6 Plein Street P.O.Box 24 Caledon 7230

Telephone: +27 (28) 2143300 Fax: +27 (28) 2141289 Website: www.twk.org.za

COMPLAINANT'S DETAILS	
Name of complainant	
Address of complainant	
Tel (if available)	Home Cell
	Work Fax
Email address ( if available)	
Signature of complainant	Date of complaint D D M M Y Y Y
DETAILS OF OFFENDING PA	<u>RTY</u>
Name and contact numbers	and futher details of the owner ( if known)
DETAILS OF THE PROPERTY O	)WNER
Physical address of the building	ng or property where the alleged contravention is taking or has taken place
DETAILS OF COMPLAINT OF	ALLEGED CONTRAVENTION
Frequency of occurrence	
How does this impact on you	Ş
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