



DEPARTMENT OF RESOURCE MANAGEMENT

Building Division

1855 Placer Street, Suite 102

Redding, California 96001

Phone: (530) 225-5761 | Fax: (530) 245-6468

Inspection Request Line: (530) 244-5068

Web: shastacounty.gov/resource-management | Email: sccodeenforcement@shastacounty.gov

CODE VIOLATION COMPLAINT

(REV: 04-30-24)

PROPERTY ADDRESS: _____

CITY/ZIP CODE: _____

ASSESSOR'S PARCEL NUMBER: _____

PROPERTY OWNER(S): _____

OWNER'S PHONE #: _____

Is this a rental property? Yes No

For County Use Only

Case #: _____

By: _____ Date: _____

Nature of Complaint(s) (Please check all that apply and provide the details of the complaint on the second page):

- Work without permit (SCC 16.04.160)
- Grading without a permit (SCC 12.12.040)
- Non-permitted use (SCC Chapter 17)
- Living in a RV (SCC 17.88.280(B))
- Illegal refuse dump (SCC 8.32.110)
- Illegal camping/squatting (SCC 8.52.040)
- Intermodal shipping container or truck trailer not permitted (SCC 17.88.280(C/D/E))
- Cultivation beyond the limits of the ordinance (SCC 17.88.320)
- Illegal burning (SCC 8.08.010)
- Unlawful discharge of untreated or partially treated sewage (SCC 8.41.050)
- Unpermitted portable toilet (SCC 8.41.160)
- Failing OWTS (septic) system (SCC 8.41.070)
- Domestic well being used to support violations or has no legitimate use (SCC 8.56.090)
- No fence for pool (SCC 8.48.040)
- Fence over 6 feet in height (SCC 17.84.030(2))
- Illegal fencing material (SCC 17.02.220)
- Other: _____

- Substandard Housing (HSC 17920-17927) – Please check all that apply:
 - Sanitation (i.e., water, mold, heating, etc.)
 - Structural hazard
 - Unsafe electrical
 - Faulty mechanical (i.e., furnace, HVAC, etc.)
 - Faulty plumbing
 - Faulty weather protection (i.e., broken, rotted, split, or buckled exterior wall or roof coverings)
 - Living in a structure that is not permitted as a dwelling (i.e., shed, garage, barn, etc.)
 - Other: _____

NOTE: This complaint will not be accepted unless you provide the following information and a signature. (This section of information will be kept confidential except by court order.)

Your Name: _____ Phone: _____

Address: _____ Email: _____

I declare under penalty of perjury that the information above is true and correct to the best of my knowledge.

Signature: _____ Date: _____

Case Number: _____

Details of Complaint and/or Map of Violation