

**CITY OF BENTONVILLE, ARKANSAS
CRIMINAL NUISANCE ABATEMENT BOARD
COMPLAINT FORM**

DATE FILED: _____

CASE NO. _____

COMPLAINANT CONTACT INFORMATION

NAME: _____

MAILING ADDRESS: _____

PHONE NUMBER(S): _____

ALLEGED NUISANCE PROPERTY INFORMATION

ADDRESS OR LOCATION:
(include legal description if known)

OWNER(S): _____

ADDRESS IF DIFFERENT _____

PHONE NUMBER(S)
(if known) _____

ATTACHMENTS

(include police reports, court records, or any other documentation to support your complaint)

AFFIDAVIT OF WITNESS

STATE OF ARKANSAS, COUNTY OF _____, ss.

The undersigned being duly sworn did depose and say that: The foregoing complaint is a true and accurate statement to my knowledge and belief. I give this statement with the understanding that this sworn statement is required by Arkansas law pursuant to Act 1190 of 2003.

Date this _____ day of _____, 200__.

Witness

SUBSCRIBED AND SWORN to before me on _____.

My Commission expires: _____

Notary Public