



Village of Wayne

5N430 Railroad Street, P.O. Box 532
Wayne, IL 60184

CONTACT / REQUEST
NUMBER:

DATE / TIME OF REQUEST:

HOW CONTACT RECEIVED:

Customer Contact / Inspection Request Building & Zoning Department

ADDRESS OF PROPERTY TO BE INSPECTED: _____

OWNER OF PROPERTY TO BE INSPECTED: _____

CUSTOMER REQUESTING INSPECTION: _____

CUSTOMER PHONE NUMBER / EMAIL: _____

CUSTOMER ADDRESS: _____

NATURE OF REQUEST:

RESULT OF INSPECTION / ACTION TAKEN:

FOR OFFICE USE ONLY

Contact Received By: _____ Dept. Referred To: _____

Employee Responding to Request: _____ Date Received For Action: _____

How Customer Contacted with Response to Inspection Request: _____ Date: _____

Employee Signature: _____ Date Contact / Request Closed: _____