

EASTERN NEW ORLEANS  
NEIGHBORHOOD ADVISORY COMMISSION (ENONAC)  
7100 READ BLVD. ~ NEW ORLEANS LA 70128  
504-218-5949

[www.enonac.org](http://www.enonac.org)

[info@enonac.org](mailto:info@enonac.org)

## CODE VIOLATION FORM

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### THIS SECTION MUST BE COMPLETED IF YOU WOULD LIKE FOLLOW UP INFORMATION

NAME: \_\_\_\_\_ Email: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

SUBDIVISION: \_\_\_\_\_ PHONE: \_\_\_\_\_

*You have the option to anonymously mail this form to the above address.*

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### THIS SECTION IS ABOUT THE COMPLAINT - BE CONCISE AND COMPLETE

ADDRESS OF THE VIOLATION: \_\_\_\_\_

IF NO ADDRESS IS AVAILABLE, PROVIDE A DETAILED DESCRIPTION: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PROPERTY OWNER (IF KNOWN:) \_\_\_\_\_

OCCUPANTS OF PROPERTY (IF KNOWN): \_\_\_\_\_

NATURE OF COMPLAINT: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are Photographs Attached: Yes      No

*Confidentiality Preference:* If you believe that disclosure of your identity would endanger your life, physical safety, or property, you may request that your identity not be disclosed. Disclosure of information revealing your identity will depend on application of this Chapter (the Public Disclosure Law), other applicable laws and whether the complaint is criminally prosecuted. With those understandings, if you prefer that your identity NOT be disclosed, simply write your initials here. \_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_