



**CODE INVESTIGATION
REQUEST FORM**

City of Larkspur Building Department
400 Magnolia Ave.
Larkspur, CA 94939
(415) 927-5038

OFFICE USE ONLY

DATE: _____ RECEIVED BY: _____

CE#: _____ CODE SECTION: _____

IN-PERSON CALL MAIL EMAIL

REPORTED BY:

Contact Name: _____

Address: _____

Email: _____ Phone #: _____

Note: Anonymous complaints cannot be processed. All information is kept confidential. This form can be completed, scanned, and emailed to: LarkspurBuilding@CityofLarkspur.org

PROPERTY AND ALLEGED VIOLATION DESCRIPTION

RESIDENTIAL

COMMERCIAL

OTHER: _____

Address to be investigated: _____

Business Name (required if a business): _____

Property Owner Name (if known): _____

Email: _____ Phone #: _____

Alleged violation (use a separate sheet if necessary):
