Third Ward CARE Committee
Problem Property/Complaint Form

NOTE: Please include this information when reporting a concern

Provide as much detail regarding the problem property or complaint, by answering the following questions:

Address of problem property where complaint occurred: _____

Is address a single family, duplex, triplex, apartment building, or business? _____

Is this an ongoing chronic problem or a single occurrence? _____

Provide the date and time of day the problem(s) occur(s):

_____

What is nature of the activity/crime being committed (i.e. drug dealing, prostitution, abandoned property, etc.)?

_____

_____

_____

Provide physical description of the residents or participants committing the crimes or people visiting property:

_____

Have you seen or heard any weapons at this property? _____

List any vehicle description and license plate numbers that may be involved:_____

Are there any children at the property? What are their approximate ages?_____

Are there any dogs at the property? _____

Have you contacted 311 or 911 or other city staff? Please provide the name, department and date of contact:

_____

Date form completed: _____

Contact Information

You may need to be contacted for additional information on this complaint, please complete the following:

First Name: _____ Last Name: _____

Address: _____ City: _____ Zip: _____
Email:_____
Home phone: _____ Cell:_____ Work:_____

Note: While identifying information will only be used for official purposes, the City cannot guarantee confidentiality

Submit form to: Council Member Diane Hofstede, Room 307, 350 South 5th St. Minneapolis, MN 55415
Email: diane.hofstede@ci.minneapolis.mn.us Fax: 612-673-3940 ATTN CM Diane Hofstede,
Or call the Office: 612-673-2203