



***For Staff Use Only/Para Uso del Confado***

APN(S): \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
          \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
          \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Zoning: \_\_\_\_\_

Relevant Ordinance Sections: \_\_\_\_\_

***Complaint received By***

Officer's Name: \_\_\_\_\_

Date: \_\_\_\_\_

San Mateo County Planning and Building Division  
455 County Center, Second Floor  
Redwood City, CA 94063

Place  
Stamp  
Here

**San Mateo County Planning and Building Division  
455 County Center, Second Floor  
Redwood City, CA 94063**

**Attn: Code Compliance Unit**

Staple or Tape Here