

Code Enforcement Office  
City of New Castle  
220 Delaware Street  
New Castle, DE 19720



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**COMPLAINT FORM**  
**City Code Violations**

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

Alleged Violator: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

Nature of Complaint: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Prior complaint? Yes \_\_\_ No \_\_\_ Date of Prior Complaint: \_\_\_\_\_

Complainant: \_\_\_\_\_ Have you contacted alleged

Address: \_\_\_\_\_ Violator? Yes \_\_\_ No \_\_\_

Phone #: (h) \_\_\_\_\_ (w) \_\_\_\_\_ If yes, explain below

Comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Complainant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**Office Use Only:**

Present Status: \_\_\_\_\_ Pending \_\_\_\_\_ Resolved \_\_\_\_\_ Date  
Closed due to: \_\_\_\_\_ Unfounded \_\_\_\_\_ No violation \_\_\_\_\_ Duplicate

Referred to: \_\_\_\_\_ Police \_\_\_\_\_ Public Works \_\_\_\_\_ MSC  
\_\_\_\_\_ Health \_\_\_\_\_ Housing \_\_\_\_\_ Other  
\_\_\_\_\_ Building/Fire \_\_\_\_\_ SPCA