



# CITY OF COVINGTON - CITIZEN ACTION REQUEST (CAR)

16720 SE 271<sup>st</sup> Street Suite 100 Covington, WA 98042

(253) 480-2400

Fax (253) 480-2401

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

Received by: \_\_\_\_\_  
(Staff name)

COMPLAINANT/STAFF (Person making request)	PROPERTY LOCATION
Name:	Address/Location of Incident:
Address:	
Phone: Phone #2: e-mail:	Property Owner Name (if known):
Would you like your contact information to remain confidential? ___ Yes ___ No	Phone (if known):

Description of Issue or Comment/Request:	

### FOR OFFICE USE ONLY BELOW THIS POINT

___ Community Dev   ___ PW/Maintenance   ___ Parks   ___ Code Enforcement   ___ Police	
Date Department Received: _____	Police Department: _____
Due Date: _____	Officer Name: _____
Date Dept. contacted Citizen: _____	Police Case No.: _____
Pertinent Ordinance Sections: _____	Department Case No. _____

INITIAL INSPECTION REPORT:

ACTION TAKEN:

RESPONSE/COMPLETION:

Inspector Initials: _____	Date of Inspection: _____	Completion date: _____
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Please Print Clearly

Logged by: _____	Date Copy Sent: _____	Completion Logged By: _____	Case Number: _____
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1. Clerk scans the CAR form into PermitTrax . 2 Clerk routes original CAR to appropriate department.
3. Department responds in PermitTrax, completes this form, and routes form back to City Clerk.
4. Clerk logs completion and scans complete form. (3yr retention).