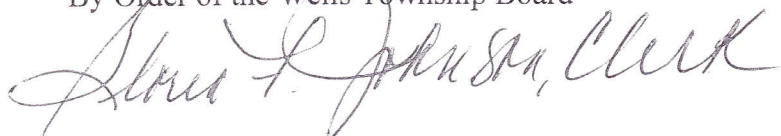


Wells Township (Delta County)

Procedures to Address Blight and Junk Ordinance Complaints
No. 1-91 and No. 2-91

1. The Wells Township Board designated the Wells Township Supervisor as the person to act on blight and junk complaints.
2. **The SUPERVISOR is only authorized to act on signed complaints and is without authority to act on verbal complaints.**
3. **The person making the complaint must use the form prepared and supplied by Wells Township.**
4. Upon receiving a signed complaint form delivered to Wells Township Supervisor is then authorized to act on the complaint.
5. Supervisor inspects the property to determine the validity of the complaint.
6. If the Supervisor determines the complaint is not valid, a report of the findings are presented to the Board. The Board decides which course of action to take.
7. If the Supervisor determines the complaint is valid, the following steps are taken:
 - A. Certified letter to violator which describes the problem and how it must be resolved.
 - B. Copy of Blight Ordinance No. 1-91
 - C. Copy of Junk Yard Ordinance No. 2-91
 - D. Copy of companies offering pickup service
 - E. Copy of M.T.A. Grandfather
 - F. Copy of court case on unlicensed vehicles
8. If the violator ignores the first letter after 30 days:
 - A. Send a second letter (10 day notice) by certified mail.
9. If second letter produces no results, Supervisor reports back to Board for directions.
 - A. Letter from Attorney to violator
10. If letter from Attorney produces no results in 30 days, Supervisor reports back to Board for directions.
 - A. Violator to court
11. **No junk complaints will be addressed from November - March each year due to the weather conditions.**

By Order of the Wells Township Board



WELLS TOWNSHIP COMPLAINT FORM

Complainant's:

Name _____

Address _____

Phone Number _____ Date of complaint _____ time _____

Reason for the complaint:

Signature of Complainant _____

Does this complaint require board action? yes _____ no _____

Does complainant request board action? yes _____ no _____

This complaint is directed to:

Supervisor _____, Treasurer _____, Clerk, _____ Board, _____ Other, _____

Comments from officer complaint is directed to:

Signature of officer: _____

NOTE: Information on this form is subject to Public Act No. 553 of 1996, The Michigan Freedom of Information Act.

