



City of Marine on St. Croix

Short Term Rental Complaint Form

Name of reporter:

Name of reported:

Address:

Address

Phone:

Phone

Email:

Email:

Date of Incident:

Time of Incident:

Was there a Marine on St. Croix Ordinance code in question?

Police Called: Yes No

Police Case Number

Officer Name

Phone Number

Was there an attempt to discuss with homeowner/renter? Yes No

If yes, what was the discussion

Nature of Incident:

Did Anyone else witness the incident?

If yes –

Name:

Address:

Phone:

Email: