



Your name and phone number: _____

SHD STAFF ONLY:

COMPLAINT TAKEN BY PHONE/VOICEMAIL

Are you a:

Member of the public Employee Other _____

Please summarize your complaint below:

Date of observed violation: _____

Time of day violation was observed: _____

Today's date: _____

Full name of business or workplace: _____

Street Address: _____

P.O. Box/ mailing address (if different):

City: _____ Zip: _____

Business Phone: _____

Nature of your complaint:

- Smoking
- Vaping
- One or more individuals were observed smoking/vaping inside a place of employment or public place.
- No visible "No Smoking" signage was observed posted, as required by law.
- One or more individuals were observed smoking/vaping within 25 feet of a workplace or public establishment entry, exit, window or air intake.

Submit by email to sipp@snohd.org OR mail to address below.

COMMENTS:

If you need information or assistance about compliance with the law, please visit the Snohomish Health District web site www.snohd.org, or call 425.339.5250.

Thank you. A notice will be sent out to businesses and workplaces notifying them of this alleged violation. We will not forward any information identifying you as the complainant.