VILLAGE OF STRASBURG
358 – 5th Street S.W. ● Strasburg, Ohio 44680
Phone: (330) 878-0075

VOLUNTARY STATEMENT FORM

REPORT OF DAMAGED/DETERIORATING PROPERTY

Name: _____ **Date of Birth:** _____

Address: _____ **Phone #:** _____

I, _____ am filling out this voluntary statement form for
(Full Name)
the Zoning Inspector, Don Wallick, of the Village of Strasburg.

Statement of Observance *(please include dates):*

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Signature: _____

Date/Time: _____

Return this form to:
358 – 5th Street S.W., Strasburg, Ohio 44680, Attn: Don Wallick, Zoning Inspector
or email to: villageclerk@villageofstrasburg.org