

**ZONING OR NUISANCE COMPLAINT FORM  
VILLAGE OF MACKINAW CITY  
102 S. Huron Avenue, Mackinaw City, MI 49701**

Description of Complaint: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Complainant's Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone No: \_\_\_\_\_ Cell No. \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\*\*\* FOR VILLAGE USE ONLY\*\*\*\*\*

Action Taken: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Mail to:  
Village Manager  
Village of Mackinaw City  
102 S. Huron Avenue  
P.O. Box 580  
Mackinaw City, MI 49701

Fax to:  
Attn: Village Manager  
*anonymous complaints only*

Email to:  
[village@mackinawcity.org](mailto:village@mackinawcity.org)  
*anonymous complaints only*

NOTE: Follow up will only occur after original, signed complaint form is received by mail or in person.