



City of Rockaway Beach, Oregon
 276 S. Highway 101, PO Box 5
 Rockaway Beach, OR 97136
 (503) 374-1752

COMPLAINT FORM

All SHORT- TERM RENTAL concerns are required to be submitted via the complaint form. You will need to call or email the owner/management company that is listed on site for an immediate issue resolve, if there has not been a response or resolve within 30 minutes, a complaint form can be utilized. This form can be emailed to cityhall@corb.us, via postage mail or deliver to City Hall directly. In case of emergency dial 911 for non- emergency dispatch dial (503) 815-1911.

Complainant/Reporting Party:

Name: _____ Phone: _____

Address: _____ Email: _____

Address of Violation: _____ Date of Occurrence: _____

Property Owner(s) – if known: _____

() I contacted the listed local agent to resolve this issue. Time contacted: _____ a.m. / p.m.

() I did not contact the local agent due to: _____

Nature of Complaint: _____

Please supply as much detail as possible, if you have photos or other related information that can be used as evidence of this violation, please submit them with this form. The submitted documentation will not be returned and will become part of the complaint file.

Signature: _____(Type name as electronic signature).

Office Use Only

Date Received: _____

By: _____