



**NEW HANOVER COUNTY  
PUBLIC HEALTH**

230 Government Center Dr., Suite 140  
Wilmington, NC 28403

P: (910) 798-6667 | F: (910) 798-7815 | [Health.NHCgov.com](http://Health.NHCgov.com)

**ENVIRONMENTAL HEALTH COMPLAINT FORM**

Complainant confidentiality is maintained in accordance with applicable laws. Please save this form to your computer before filling it out. Email your form to [programsupport@nhcgov.com](mailto:programsupport@nhcgov.com) and include the word "confidential" in the subject line.

**Today's Date (required):**

**COMPLAINANT INFORMATION (optional)**

**Name:** \_\_\_\_\_ **Email:** \_\_\_\_\_  
**Home Phone:** \_\_\_\_\_ **Work Phone:** \_\_\_\_\_  
**Street Address:** \_\_\_\_\_  
**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**ESTABLISHMENT INFORMATION**

**Name (required):** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
**Street Address (required):** \_\_\_\_\_  
**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**NATURE OF COMPLAINT (required)**

**Type of Establishment:** Hotel/Lodging    Restaurant    Grocery Store    Childcare Center    Nursing Home  
Commercial Pool    Residential Pool    Sewage Complaint    Other

**Please describe below.**