

# BOARD OF REVIEW Document + Evidence Attorney Log Sheet

## NO CHANGE REQUEST

DATE: \_\_\_\_\_

BOARD CODE NUMBER: \_\_\_\_\_

Condo / Non-Condo  
(Circle one)

ATTORNEY'S NAME/FIRM: \_\_\_\_\_

	COMPLAINT #	PIN #	TOWNSHIP	"EXHAUST ADMIN. REMEDY?"
1.				<input type="checkbox"/>
2.				<input type="checkbox"/>
3.				<input type="checkbox"/>
4.				<input type="checkbox"/>
5.				<input type="checkbox"/>
6.				<input type="checkbox"/>
7.				<input type="checkbox"/>
8.				<input type="checkbox"/>
9.				<input type="checkbox"/>
10.				<input type="checkbox"/>
11.				<input type="checkbox"/>
12.				<input type="checkbox"/>
13.				<input type="checkbox"/>
14.				<input type="checkbox"/>
15.				<input type="checkbox"/>
16.				<input type="checkbox"/>
17.				<input type="checkbox"/>
18.				<input type="checkbox"/>
19.				<input type="checkbox"/>
20.				<input type="checkbox"/>

\*\*\*COMPLAINTS WITH MULTIPLE PINS SHOULD ONLY INCLUDE LEAD PIN ON THIS FORM\*\*\*

TOTAL # OF DOCUMENTS FILED: \_\_\_\_\_

AUTHORIZED BY: \_\_\_\_\_