

**CITY OF CORAL SPRINGS CODE ENFORCEMENT
CODE CASE INQUIRY
STATUS REQUEST**

Date original request made: _____

Request Made By: _____

Company Name: _____

Fax #: _____

Property address: _____

Folio #: _____

Check #: _____ or Escrow Account: _____
Provide Check # *If escrow, place X here*

What Specific information is needed:

**For a quicker response to your request, please fax this form to
954-344-5937.**

City's Response

Form received: _____

Response faxed: _____ Mailed: _____

Other: _____ Inquiry pending: _____

This form processed by: _____ Date: _____