



**Comhairle Contae  
Dhún na nGall**  
Donegal County Council

**For Office Use Only**

**Ref No:**

**Date Received:**

**Return this form via:**

**Email To:**

[planningenforcement@donegalcoco.ie](mailto:planningenforcement@donegalcoco.ie)

**Post To:**

Planning Enforcement Unit  
County House  
Lifford  
Co Donegal  
F93 Y622

**Contact Details**

**T:** (074) 91 53900

**E:** [planningenforcement@donegalcoco.ie](mailto:planningenforcement@donegalcoco.ie)

**W:** [www.donegalcoco.ie](http://www.donegalcoco.ie)

**Please Print in Block Capitals**

**Complainant Details**

Name

Address

Phone Number

E-mail Address

**Site Owner Details**

Name

Address

Phone Number (if  
known)

**Developer Details**

Name

Address

Phone Number (if  
known)

<b>Site Location</b>	
Full Address	
Eircode	
Details of Alleged Unauthorised Activity	
Commencement date of Activity	
Planning and/or Enforcement Ref Nos (if known)	
Attaching a Site Location Map or Sketch identifying directions & location? (Yes \ No)	
Attaching Photographs? (Yes \ No)	
<b>Signature</b>	
<b>Date</b>	

Complaint forms must be signed and dated to be considered valid.