

1300 County-City Building
227 W. Jefferson Blvd.
South Bend, IN 46601-1830



Invoice Dispute Form

City of South Bend Pete Buttigieg, Mayor
DEPARTMENT OF CODE ENFORCEMENT
Tracy Skibins
Director

Please read the following before filling out the invoice dispute form:

1. This form may not be used to dispute a delinquent invoice that is subject to a pending collection action. If you have received notification of a collection action, please follow the instructions contained on the collection notice.
2. This form may not be substituted for any action required under I.C. 36-7-9-7 or I.C.36-7-9-8 of the Unsafe Building Law.
3. This form must be submitted within ten (10) days of the date on the document being appealed. After the appeal is considered, you will receive a determination in the mail containing additional information and instructions.

Instructions:

- To dispute an invoice you need to fill this form out in its entirety. Incomplete forms will not be reviewed.
- Include copies of any pictures you may have.
- If you are disputing based on incorrect ownership information, please include a copy of the recorded or notarized deed showing a transfer of ownership.
- If you are disputing based on incorrect address, please provide copies of pictures showing your property line vs. where the citation occurred.
- If you had a special pick up scheduled, please indicate that below. We will verify the special pick up with the Department of Solid Waste.
- If you personally paid someone to remove these items, please provide a copy of the receipt.
- This form will need to be filled out for **each** disputed invoice.
- Print legibly!

Property Address: _____ **Date:** _____

Name: _____ **Phone Number:** _____

Address (if different than property address): _____

City, State, Zip (if different than property address): _____

E-mail Address (if you would prefer to be contacted electronically): _____

INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	RECORD NUMBER	VIOLATION TYPE	VIOLATION DATE

Briefly describe why you are disputing this invoice: _____

Mail this completed form along with any copies of photos and/or deed to:

Department of Code Enforcement, Invoice Dispute
1300 County-City Building
227 W. Jefferson Blvd.
South Bend, IN 46601-1830

≈OR≈ e-mail information to:
CodeEnforcementBilling@southbendin.gov