

CITIZEN COMPLAINT FORM

Citizen Information

Name: _____

Address: _____

_____ (Town/City) (State) (Zip)

Telephone Numbers: _____ (Home) (Work)

Complaint Information

Date: _____ Location: _____

Name of person(s) or description of property against whom/description complaint is lodged:

Nature of Complaint: (If additional space is needed, please use back of form or attachments.)

Signature: _____ Date: _____

Employee Receiving Complaint: _____ Date: _____