

WRITTEN COMPLAINT FORM

Date: _____

Problem/Complaint:

Owner _____ Tax Parcel No. _____

Address _____

Issue to be addressed: _____

Resolution:

Action taken: _____

Name/Address of Complainant: _____

Telephone Number of Complainant: (home) _____ (work) _____

Telephone complaint: taken on _____ by _____. Complainant advised that their issue would be written down and kept on record.

Date: _____

By Whom: _____