

Address under which to file _____

Complaint Notes	
Location:	For Office Use Only
Name:	
Address:	
Phone:	
Complaint Address if different from above:	
Date/Time:	
Follow-up:	
By:	

Nature of Complaint:

Specifics: _____

OFFICE USE ONLY – DO NOT WRITE BELOW THIS LINE

Resolution: _____

cc: _____
Councilperson in Charge of Area of Complaint