

Complaint/Damage Form

Note: Form must be completed and signed before the Town will deal with any complaint.

Name: _____ Address: _____ _____ Tel: _____
Nature of Complaint: <input type="checkbox"/> Private Property <input type="checkbox"/> Town Property <input type="checkbox"/> Staffing <input type="checkbox"/> Council <input type="checkbox"/> Pest <input type="checkbox"/> Infrastructure <input type="checkbox"/> Fire <input type="checkbox"/> Parks and Recreation <input type="checkbox"/> Economic Development <input type="checkbox"/> Taxation <input type="checkbox"/> Other Details: _____ _____ _____ Signature: _____ Complaint Receiver: _____ Date Received: _____

<u>OFFICE USE ONLY</u>	
Action / Dated: _____ _____	
Completion/Solution/Resolution/Council Decision (Motion) / Dated: _____ _____	
File #: _____	Date Closed: _____