

Citizen Complaint Form

Type of Complaint _____

Complaining Party

Name: _____

Address: _____

Phone: _____

Offensive Party

(if known)

Name: _____

Address: _____

Phone: _____

Narrative: _____

Office Use Only

Date Rec'd: _____

Time Rec'd: _____

Taken by: _____

Log No. _____

Complainant Signature

Date