

Resident's Complaint Form

Date Filed: _____

Complaint Number: _____

Disposition Date: _____

Complainant: _____

Address: _____

Phone Number: _____

Email: _____

Complaint is Filed Against: _____

Address: _____

Detailed description of complaint:

The above statements are true to the best of my knowledge.

Signature

Complaint Received by: _____

Action taken: _____

Return to Secretary Kathy Myers kmyers@kennedytwp.com