

Department of Public Safety



COMPLAINT / REQUEST FOR SERVICE

LOCATION OF COMPLAINT / REQUEST FOR SERVICE: _____

TYPE OF COMPLAINT / REQUEST: _____

- | | | |
|--------------------|--------------------|--------------------|
| 1. ANIMAL / DOG | 8. ROAD / STREET | 15. TRAFFIC |
| 2. CURB / SIDEWALK | 9. RODENT | 16. TRAFFIC SIGNAL |
| 3. GARBAGE / TRASH | 10. SEWER | 17. TREES / SHRUBS |
| 4. LEAVES | 11. SIGN | 18. WEEDS |
| 5. NOISE | 12. SPEEDING | 19. ZONING |
| 6. PARKING | 13. STREET LIGHT | 20. OTHER |
| 7. RECREATION | 14. STREET OPENING | |

BRIEF DESCRIPTION OF COMPLAINT / REQUEST:

PERSON MAKING REQUEST (THIS INFORMATION IS OPTIONAL. INFORMATION WILL BE KEPT CONFIDENTIAL):

NAME: _____ ANONYMOUS: _____

ADDRESS: _____

PHONE: HOME _____ OTHER _____

THIS SPACE FOR OFFICE USE

REFERRED TO:

POLICE	CODE / ORDINANCE	COUNCIL / MAYOR
DPW	FIRE MARSHALL	OTHER

FINAL DISPOSITION: