

## DPW Complaint Form

Complaint made in Person	
Complaint made via Telephone	
Complaint made via Email	
Name of Plaintiff:	
Contact Number:	
Date/Time of Occurrence:	
Date Filed:	_
Nature of Compliant: (check appropriate choice)	
<b>▲</b> Intersection	<b>▲</b> Property Condition
	<b>▲</b> City Employee
▲ Signage  Damaged Missing	<b>▲</b> Storm Inlet
Type	<b>Storm inici</b>
<b>▲</b> Street	<b>▲</b> Traffic signal
<b>▲</b> Street Light	<b>▲</b> Curbing
<b>▲</b> Pothole	<b>▲</b> Other
Complaint Detail:	
Action Taken:	
Complaint Taken By:	

Complainant signature:	

Witness (are you willing to testify): **A** YES or **A** NO