

# CITY OF HOKAH CITIZEN COMPLAINT FORM

Please select the area in which this complaint concerns:

- |   |   |
|---|---|
| <input type="checkbox"/> Library                      | <input type="checkbox"/> Police Department    |
| <input type="checkbox"/> City Hall/Community Center   | <input type="checkbox"/> Policy and Ordinance |
| <input type="checkbox"/> Neighbor                     | <input type="checkbox"/> Parks and Recreation |
| <input type="checkbox"/> Public Works                 | <input type="checkbox"/> Utilities            |
| <input type="checkbox"/> Other (please specify) _____ |   |

Telephone complaints will not be accepted.

Anonymous complaints will not be considered valid and action will not be taken.

*Phone and Address information will not be publicly noted*

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Please indicate below your complaint or concern:

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Signature of Complainant: \_\_\_\_\_

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**Office Use Only**

Date Received \_\_\_\_\_ Resolved: *Yes No* Pending: *Yes No*

Action Taken \_\_\_\_\_

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