



CITIZEN'S COMPLAINT/CONCERN FORM

Name of person submitting complaint/concern: _____

Physical Address: _____

Mailing Address (If Different): _____

Phone Number: _____

Issue/Concern: _____

Signature of Complainant: _____

-----FOR OFFICE USE ONLY-----

Referred to: CEO Select Board Assessors LPI ACO E-911
 Road Comm. Winter Rds. Other: _____

Date Forwarded: _____ Replied On: _____

Resolved: Yes No Pending: Yes No

Action taken to correct or clarify Issue/Concern:

By: _____ Date: _____