

# LINESVILLE BOROUGH COMPLAINT FORM

For Office Use Only

Type of complaint:

- |  |  |
|--|--|
| <input type="checkbox"/> Storm Drainage  | <input type="checkbox"/> Parking / Traffic |
| <input type="checkbox"/> Streets / Signs | <input type="checkbox"/> Plowing           |
| <input type="checkbox"/> Water Leak      | <input type="checkbox"/> Other             |

Address of Complaint site: \_\_\_\_\_

Brief Explanation of Complaint:  
(Attach additional sheets as necessary)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

Daytime Phone: ( ) \_\_\_\_\_ (for notification of disposition)

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Department and/or person referred to: \_\_\_\_\_

Department Head (copied): \_\_\_\_\_

Date: \_\_\_\_\_

Disposition: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date Complainant was notified of disposition: \_\_\_\_\_

Date Dept. Head  
Rec'd Disposition