

# CITIZEN COMPLAINT / REQUEST FOR SERVICE

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

Officer / Resident \_\_\_\_\_  
(circle one) Name Ph#  
Address City, State, Zip Code

I noticed the following problem, and would like it addressed:

## TRAFFIC/PARKING COMPLAINT:

- Speeding
- Stop Sign Violation
- Reckless Driving
- Other \_\_\_\_\_  
Explanation
- Time Limit Parking Violation
- Vehicle Blocking Driveway, etc.
- School Bus Stop Arm Violation

Location/Time Vehicle: Make Model Regis Color  
Occupant Description Miscellaneous Information  
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## DAMAGE/REPAIR REQUEST:

- Sign \_\_\_\_\_ Location
- Graffiti \_\_\_\_\_ Location
- Lightpole \_\_\_\_\_ Location and Number
- Other \_\_\_\_\_ Explain / Location

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Neighborhood Problem: \_\_\_\_\_ Location

People Involved: \_\_\_\_\_  
Name Address Ph#  
Name Address Ph#  
Name Address Ph#

PLEASE COMPLETE APPLICABLE INFORMATION, AND SUBMIT TO YOUR/SHIFT SUPERVISOR.

Received By: \_\_\_\_\_  
Name Date

Assigned To: \_\_\_\_\_  
Name Date

Completed By/On: \_\_\_\_\_  
Name Date

COMMENTS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_