CITY OF FRUITLAND

Resident Complaint

Date: _____ Time: _____ Received by:_____

Complainant Information:

Name: _____ ☐ ***Do not disclose complainant information***

Address: _____

Phone: _____

Complaint/remarks:

_____

_____

_____

_____

☐ ***Administration*** ☐ ***Police*** ☐ ***Zoning*** ☐ ***Public Works*** ☐ ***Fire*** ☐ ***Building***

Complaint given to:_____ Date: _____ Time: _____

Detail on compliance:

_____

_____

_____

Employee Signature: _____

Reviewed by: _____