



Town of Middlebury Complaint Form

Complainant Name: _____ Date: _____

Address of Complainant: _____

Daytime Phone No.: _____ Alternate Phone No.: _____

Email Address (if applicable): _____

Complaint Location: _____

Details of Complaint: _____

Property Owner (if known): _____

Complaint Taken By: _____

For Office Use Only

Department to be Notified: _____ Police Department _____ Wastewater Treatment Department
_____ Public Works _____ Park Department _____ Water _____ Other

Initial Action Taken:

_____ Copy of Complaint Given to Town Manager Date: _____

_____ Copy of Complaint Given to Department Head Date: _____

Action Taken to Resolve Complaint:

1) _____

_____ Date: _____

2) _____

_____ Date: _____

How Was Complaint Resolved?: _____

Resolved By: _____ Date: _____

Supervisor Signature: _____ Date: _____

Town Manager Signature: _____ Date: _____