

CITY OF LUCAN
CITIZEN COMPLAINT FORM

DATE: _____

- City Staff
- Public Works (Water, Sewer, Streets)
- Maintenance Dept
- Park & Recreation
- Nuisance (please specify) _____
- Other (please specify) _____

All personal information will be kept strictly confidential

Name _____ Phone _____

Address _____

Please indicate below your complaint or concern:

Suggestion on how to handle the situation:

Signature of Citizen _____

Office Use Only

Date Council Received _____

Action Taken _____

PLEASE RETURN COMPLETED FORM TO THE CITY CLERK