



Citizen Comment Form



Reporting Person's Information

Name:	Date:
Address:	
Phone #:	Email Address:

Nuisance/Code Location

Name:
Address:

Comments

Signature

Office Use Only

____ City Clerk	____ Code Compliance	Date Received _____
____ Deputy Clerk	____ Mayor	Received By: _____
____ Public Works	____ Records Clerk	Forwarded To: _____
		Respond By: _____

Actions Taken
