PORT CARBON BOROUGH
301 First Street
Port Carbon, PA 17965
570-622-2255

Date Received

COMPLAINT

Complainant's Name (print): _____

Phone # _____ - _____ - _____

Address (Number & St, Rd, or Dr) _____

Town/City, State, & Zip Code _____

Description of Complaint/Problem (include Name and address / location of complaint):

_____

_____

_____

_____

_____

_____

_____

_____

Signature of Complainant: _____

OFFICIAL USE ONLY

Referred to:

__ Road Department __ Zoning / Code Enforcement __ Police __ Solicitor

__ Engineer __ Boro Council __ Planning Commission __ Other

Action Taken:

_____

_____

_____

_____

_____

_____

_____

_____

Contact Made by: _____ Date: _____/_____/_____

Complainant: _____ Satisfied _____ Not Satisfied