

Complaint Inquiry Request Other

Assign form same day as received. All items will be responded to within 5 business days.

Today's Date: _____ Time Rec'd: _____

5 Business days from today: _____ Employee who rec'd form: _____

Assigned to: _____



Name: _____ Telephone: _____

Address _____ City/Town: _____ ST: _____ Zip: _____

Are you a: _____ Resident? _____ Non Resident? Email address: _____

Please describe in detail the nature of the complaint, inquiry or request. (Use back side if needed.)



Action Taken Date: _____ Selectmen signature: _____

Outcome Date: _____ Selectmen Signature: _____

