

CITY OF MORRIS

FORMAL COMPLAINT FORM

Date of Incident: _____

Time: _____

Complaint Type

Weeds/Trash: ____

Stormwater/Drainage: ____

Roads/Pothole: ____

Inoperable Vehicle: ____

Public Nuisance: ____

Animals: ____

Other: ____

Employee: ____

Name of Employee: ____

Location of Property

Address of violation: _____

(If not employee)

Address of Complainant: _____

Comments/Complaint

Complainant (Print) _____

Date: _____

Complainant (Sign) _____