



City of Wahkon

**Wahkon
Citizen Complaint Form**

Please select the area in which this complaint concerns:

- Neighbor
- City Staff
- Parks
- Wastewater Department
- Streets
- Other (please specify) _____

Notice under the Minnesota Government Data Practices Act: The City of Wahkon collects your personal information on this form to help investigate the complaint and inform you of the results. The data from this form will be used by the City Clerk or the person who is investigating the complaint on behalf of the City. Your personal information will be kept confidential and will not be disclosed to the person about whom you are complaining. You are not required to provide any personal information, but this may prevent the City from investigating your complaint and /or informing you of the results.

Name: _____ Phone: _____

Address: _____

Please indicate below your complaint or concern: _____

Signature of Complainant: _____ Date: _____

Please return completed form to City Hall

Office Use Only

Date Received: _____ Resolved: *YES NO* Pending: *YES NO*

Action Taken: See Reverse Side

Date of Response to Complainant: _____ Date Given to City Council: _____