



*City of 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 to help investigate the complaint and inform you of the results. This data 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 a signature is required before the city will move forward with the complaint. **IMPORTANT: If this issue would go to court, it is our understanding this information would no longer be confidential.**

Your Name: \_\_\_\_\_ Ph #: \_\_\_\_\_

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: \_\_\_\_\_