

VILLAGE OF HOSKINS CITIZEN CONCERN/COMPLAINT FORM

If possible, please attend Village Board Meeting to assist the Board in clarification and rectifying the situation.

Name of person identifying concern/making complaint _____

Residential address _____

Phone Number _____ Email Address _____

Concern/Complaint Details

Date of Incident _____ Time _____

Location of Incident _____

Who/What is the subject of your concern or complaint? _____

DETAILED Summary of your concern or complaint _____

Witness Details (if applicable)

Name of Witness(es) _____

Address _____

Phone Number _____

Concern or Complaint Outcome

How would you like this issue resolved? _____

Signature of Concerned Citizen/Complainant

Action taken by Village
