

**MUNICIPAL CIVIL INFRACTION
VILLAGE OF ELBERTA
CITIZEN COMPLAINT FORM**

Please complete the following information so that the Village can investigate your complaint.

Contact Information - Please print clearly

Name _____ Date _____

Street Address/P.O. Box _____

City _____ State _____ Zip Code _____

Phone Number: Home # _____ Cell # _____

Email _____

Nature of Complaint: (include the date, time, place, and facts of your complaint)

Explain how you feel the complaint should be resolved:

Signature _____ Date _____

All complaints must be signed and dated to be considered valid.

Village Office Use Only

Received by: _____ Date: _____

Disposition _____

Signature _____ Date _____