

TOWN OF FRANCESVILLE – COMPLAINT FORMS

NAME: _____

LOCATION: _____

DATE & TIME: _____

PHONE: _____

SERVICE REQUESTED (CIRCLE APPROPRIATE ITEMS)

STREET REPAIRS(POTHoles)

STREET SIGNS

CURB REPAIRS

STREET LIGHTS

WATER ISSUES

STORM DRAINS

PARK ISSUES

MISC: _____

DESCRIPTION OF ISSUE

REPLY FROM TOWN COUNCIL

ACTION TAKEN

SIGNED: _____ DATE: _____ TIME: _____