



# City of Blue Lake Concern/Complaint Form

Please complete and return to City Hall  
111 Greenwood Ave., Blue Lake  
707-668-5655      707-668-5916-fax

No# \_\_\_\_\_

Copy to Issuer \_\_\_\_\_

\_\_\_\_\_

DATE STAMP

Name : \_\_\_\_\_ Physical Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Date of Incident: \_\_\_\_\_ Time of Incident: \_\_\_\_\_

Location of Incident: \_\_\_\_\_

Write out and explain your complaint as clearly as possible: \_\_\_\_\_

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### Office Use Only

Received by City Manager on: _____	Referred to: _____
Actions Taken: _____	
_____	
Returned to City Manager on: _____	Filed by Clerk on: _____