CITY OF AMITY CITIZENS' COMPLAINT FORM

| Date: | | - | 109 Maddox Avenue P.O. Box 159 Amity, OR 97101 Ph: (503) 835-3711 Fax: (503) 835-3780 | AMIT |
|------------------------------|--|---|---|-----------------------------------|
| I, | | wish to make the following | complaint: | Established Englann Streety Engla |
| | (Print Name) | | • | |
| □ Pu | ablic Nuisance at | | | |
| Di | iscourteous or unresponsiv | ve city employee | | |
| □ Ol | bstruction of a city street of | or sidewalk at | | |
| | egal parking | | | |
| ☐ Tr | railer or RV being used as | a residence at | | |
| □ Po | ossible unpermitted constru | uction activity at | | |
| O ₁ | ther | | | |
| | | | | |
| | | | | |
| north of 123 | 2 nd Street". If the complainable to give clear direction | address is not visible, give cle nt is not visible from the street, ns, be sure to put your contact | , please describe when | re it can be seen. |
| private proper problem. If v | erty, we will have to contact | uired, but can be very helpful. et you directly to get permission the complaint, and are unable taken. | n to enter your proper | ty to observe the |
| I understand | that city staff will investig | ate and take appropriate action. | | |
| | | Address: | | |
| | Complainant Signature | | | |
| □ I wish to | be contacted by staff as a f | | | |

DO NOT WRITE BELOW THIS LINE – FOR OFFICE USE ONLY Name of supervisor receiving complaint: Date complaint was given to supervisor: **Supervisor Comments:** Written By: Name/Title Date & Time Additional Info: Written By: Name/Title Date & Time ☐ Additional Documents Attached Copy given to (original on file with recorder): ☐ Mayor ☐ City Administrator ☐ Police Chief Date:_____ Emp. Int.____