



CLINTON TOWNSHIP HALL  
CIRCA 1939

**Clinton Township  
Lenawee County**

172 W. Michigan Avenue  
P.O. Box G  
Clinton, Michigan 49236

Phone 517-456-4837  
Fax 517-456-4608  
Phone 517-456-6701 Clerk/Supervisor

**Clinton Township Official Complaint Form.**

Name \_\_\_\_\_

Street address \_\_\_\_\_

Phone \_\_\_\_\_

email address \_\_\_\_\_

Date filing Complaint \_\_\_\_\_

Did you call the Clinton Township office? \_\_\_\_\_

Who did you talk to? \_\_\_\_\_

Clinton Township Supervisor will respond to your complaint within business 10 days by phone, email or by letter. If your complaint or problem is such that it could possibly lead to harm to you or your family please call 911 immediately.

Please list your complaint. Write down all the information you are concerned about in the space below. List all pertinent information with details. You may add additional pages if needed.

Please sign here \_\_\_\_\_

Adopted 9/14/2020