

SIDNEY TOWNSHIP  
P.O. Box 141, Sidney, MI 48885  
(989) 328-3535

## CITIZEN COMPLAINT FORM

I wish to make a complaint against:

Name \_\_\_\_\_ Phone: \_\_\_\_\_

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

The address where the complaint exists: (Please include directions to property)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The complaint is:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Your Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Signature \_\_\_\_\_ Date: \_\_\_\_\_

<i>For Township Use Only</i> Date: Log Number:
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