

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: \_\_\_\_\_

\_\_\_\_\_  
*For Township Use Only*

*Date:*

*Log Number:*

\_\_\_\_\_