City of Union

Citizen Action Form

The purpose of this form is to allow citizens the opportunity to inform the City of any ***Complaint, Concern, Comment or Complaint.*** Your city council believes that an active citizenry is helpful in correcting many of the civic problems, which affect all citizens, directly or indirectly. The City believes this tool will assist in identifying violations or concerns, tracking corrective measures and working towards a better quality of life for the people of Union.

☐ **Complaint** ☐ **Concern** ☐ **Comment** ☐ **Compliment**

Complainant Information: (can be kept confidential) ☐ Please keep confidential

Name:_____

Address:_____

Phone:_____ Cell:_____

Address of Complaint/Concern:_____

Complaint/Concern: _____

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For Office Use Only:

Date Received:_____ By:_____

Forward to: ☐ **Ordinance Officer** ☐ **Fire Chief** ☐ **Public Works** ☐ **City Administrator**

Action Taken: (attach additional information if necessary**)**

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☐ **Sent to Council** **Date:**_____

Thank you for your concerns. Please be sure to turn this form in to City Hall at the front desk or drop box.