

Town of Clarkdale
890 Main Street
Post Office Box 308
Clarkdale, AZ 86324-0308
Phone: (928) 639-2400
Fax (928) 639-2409
TTY: 1-800-3678939

COMPLAINT AND SUGGESTION FORM

Name _____ Date _____

Mailing Address _____ Phone _____

Signature _____

Anonymous complaints are accepted, however the person filing the complaint will not receive a response as to the action taken)

Please check one: Complaint _____ Suggestion _____ Request _____

Details: _____

Please Note: Complaints are a public record. Though we do not notify persons who are the subject of the complaint who filed the complaint, upon request copies of this form and any attachments will be distributed to any interested person. If you do not want to be known as the person who filed the complaint, you may want to consider making an anonymous complaint.

Mail or Deliver Form to Address Listed Above

To be completed by Town Employees only

Received By: _____ Date: _____ Time: _____

Assigned To: _____ Date: _____ Time: _____

Action Taken: _____

Response As Attached was Provided By: _____