CITIZEN'S COMPLAINT/CONCERN/COMMENT/SUGGESTION

City of New York Mills
218-385-2213

DATE:_____ TO: _____

Name: _____

Address: _____Phone:_____

Please indicate below your complaint/concern/comment/suggestion:

_____

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_____

A reply will be given within 10 business days of receiving this form.

Office Use Only

Date Received: _____ Referred to:_____Replied on:_____

Resolved: ***Yes No*** **Pending:** ***Yes No***

Notation:_____

_____

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_____

By:_____Date:_____

(NOTE: Return completed form to City Clerk or any Council Member)