



CITY MANAGER'S OFFICE
CITY HALL, 58 OPERA HOUSE SQUARE
CLAREMONT, NH 03743
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CITIZEN COMPLAINT FORM

Name of Citizen: _____ Date: _____

Citizen Address _____ Telephone: _____

Referred By: _____ Reported to: _____

Nature and Location of Complaint: _____

(Please attach additional sheet if needed)

Signature _____

For Office Use Only

Referred to for Response/Action: _____ Date: _____

____ City Manager	____ Assessing	____ Library
____ City Solicitor	____ Planning/Development	____ City Council
____ Public Works	____ Welfare	____ Police Dept./Commission
____ Finance	____ Parks and Recreation	
____ Fire Department	____ Health/Code/Building Inspection	

Other: _____

Matter Resolved: _____

Response to Citizen: _____

Date: _____

Signature: _____