Resident Complaint Form

Date: _____

Location: _____
Russell Gardens, NY

Complaint: _____

_____

_____

_____

_____

_____

_____

ANONYMOUS COMPLAINTS ARE NOT ACCEPTED

Submitted By: _____

Address: _____ Phone # _____

_____ Email _____

Valid complaints will be placed in property folder

Office Use Only

Received by: _____ Date: _____

Forwarded to: ☐ Village Office ☐ Building Department
☐ Department of Public Works ☐ Other: _____

Follow up: _____

_____