

GLENFIELD BOROUGH

Property Complaint Form

Date of Complaint: _____ Time: _____

Details of the Person Making the Complaint (*all fields required)

Name: _____

Address: _____

Phone Number: _____

Details of Complaint

Address of Property: _____

Property Owner or occupant complaint is against (if known): _____

Description of incident or complaint: _____

Received Dates and Outcome (Office Use Only)

Complaint Received by: _____

Method by which Complaint was made: _____ in person _____ mail

Date Received by Ordinance Officer: _____

Date Investigation was initiated: _____

Results of Investigation and action taken:

*You may be contacted for any additional information needed about the complaint but will not be contacted about the outcome of the investigation. Your name will remain anonymous to the offender.

Signature of Complainant: _____

265 Dawson Avenue
Sewickley, PA 15143

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