TOWN OF ARCHER LODGE
COMPLAINT INVESTIGATION REQUEST

DATE:

Person Initiating Complaint: _____

Address: _____

Phone: _____

E-Mail Address: _____

Complaint Street Address: _____

Brief Description of Complaint:

********** FOR OFFICE USE ONLY ********

Parcel Identification #: _____

Property Owner: _____

Mailing Address: _____

City, State, Zip: _____

Phone: _____

DATE	DISPOSITION	CASE#

Revised: 11-13-2017