

# FLORESVILLE

## CITIZEN'S COMPLAINT FORM

DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

**Complainant:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Contact # \_\_\_\_\_

**Nature of Complaint :**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Location of Complaint:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

RECEIVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

**DEPARTMENT ISSUED TO:**

- |  |  |
|--|--|
| <input type="checkbox"/> CODE COMPLIANCE | <input type="checkbox"/> WASTE/WATER SEWER |
| <input type="checkbox"/> PARKS           | <input type="checkbox"/> MISC              |
| <input type="checkbox"/> WATER           | <input type="checkbox"/> STREETS           |
| <input type="checkbox"/> ADMINISTRATION  | <input type="checkbox"/> POLICE DEPARTMENT |

**\*\*\*CITY MANAGER TO RECEIVE A COPY OF ALL COMPLAINTS\*\*\***

**Non-Discrimination Statement:**

The following information is requested by the Federal Government in order to monitor compliance with Federal laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, we are required to note the race/national origin of individual applicants on the basis of visual observation or surname.

**Check Appropriate Ethnicity and Race:**

1. ETHNICITY: \_\_\_\_\_ Hispanic or Latino descent \_\_\_\_\_ Not of Hispanic or Latino descent
2. RACE: \_\_\_\_\_ White \_\_\_\_\_ Asian \_\_\_\_\_ Black or African American  
\_\_\_\_\_ American Indian/Alaska Native \_\_\_\_\_ Native Hawaiian or Other Pacific Islander