

**COMPLAINT / PUBLIC SUGGESTION RECORD
VILLAGE OF BROADVIEW**

THE VILLAGE OF BROADVIEW WELCOMES COMPLAINTS, SUGGESTIONS, COMMENTS AND COMPLIMENTARY REMARKS ABOUT THE VILLAGE'S FACILITIES, PROGRAMS, SERVICES AND PERSONNEL. BY TAKING THE TIME TO COMPLETE THIS FORM, YOU GREATLY ASSIST THE VILLAGE IN MEETING ITS COMMITMENT TO PROVIDE QUALITY SERVICES TO THE COMMUNITY.

COMPLAINT / COMPLAINT INFORMATION

REGISTERED BY:

NAME: _____
ADDRESS: _____
DAYTIME PHONE: _____

INFORMATION RECEIVED BY:

NAME: _____ PHONE # _____
DEPT: _____ LETTER: _____
DATE: _____ PERSON: _____
TIME: _____ FORM LETTER: _____

COPY (WHEN REPORT RECEIVED) TO MAYOR'S OFFICE: _____

NATURE OF COMPLAINT / SUGGESTION: (Be specific, Include date, location, and circumstances, etc.)

Referred To: _____

DISPOSITION OF COMPLAINT / SUGGESTION

Action Taken:

REGISTRANT NOTIFIED: Yes ___ By Phone ___ Letter ___ In Person ___
OF DISPOSITION: No ___ Date Notified ___/___/___ Notified By _____

REVIEWED BY DEPT HEAD ___/___/___ **Mayor's Office (when report is completed)** ___/___/___