

# CITY OF FARLEY

**301 First Street NE**

**FARLEY, IOWA 52046**

PHONE 563-744-3475

FAX 563-744-3303

## Citizen Complaint Form

Please complete the following information so that the City can investigate your complaint.  
Please print clearly.

Date \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_ Phone Number \_\_\_\_\_

If requested will you attend a City Council meeting to explain your complaint? Yes \_\_\_ No \_\_\_

Nature of Complaint: (include the date, time, place, and facts of your complaint)

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

Explain how you feel the complaint should be resolved:

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

Should a citation be issued, you may be required to testify to the above complaint in a Court of Law. Do you agree to so testify? Yes \_\_\_ No \_\_\_ (If you check No it is very possible that the City will not take any action on your complaint.)

Signature \_\_\_\_\_ Date \_\_\_\_\_

*All complaints must be signed and dated to be considered valid.*

### City Hall Office Use Only

Received by: \_\_\_\_\_ Date \_\_\_\_\_

Copied to: \_\_\_\_\_ Date \_\_\_\_\_

Mayor's Signature: \_\_\_\_\_ Date \_\_\_\_\_

Follow Up Completed by: \_\_\_\_\_ Date \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_