

TOWN OF WOODRUFF

COMPLIMENT/COMPLAINT/CONCERN FORM

The Town of Woodruff cares about issues that are important to you and appreciates you taking the time to communicate with us. We know that our community can only become better with all of us working together. Please complete the following form so that we may better serve you.

DATE: _____

TIME: _____

NAME: _____

ADDRESS: _____

PHONE: _____

E-MAIL: _____

PROPERTY LOCATION, IF APPLICABLE:

COMMENT AREA (attach additional sheets if necessary):

Signature: _____

FOR OFFICE USE ONLY:

TOWN BOARD ACTION

Referred to: _____

Report back to: _____

Town employee: _____

Report of findings:

Recommended action:
