

# City of Janesville

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Phone # (319)987-2905

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## CITIZEN COMPLAINT FORM

Please complete the following information so that the City can properly investigate and determine if the City needs to take action.

Name: \_\_\_\_\_  
\_\_\_\_\_

Date:

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone #:

Nature of Complaint: (Please include as much detail as possible including location, dates, times, witnesses, etc.... Try and be brief, but be sure to tell WHAT happened and WHERE it happened. You may use additional sheets if necessary. Please print or type clearly.)

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Explain how you feel the complaint should be resolved:

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**\*\* A city official will review your written complaint to determine if action needs to be taken. The City will take your details on how to resolve the issue into consideration, but the City reserves the right to resolve any complaint as the City sees fit. Please keep in mind your written request is simply a request and is not instructions the City is required to follow. If any of this document is found to be illegally falsified, document will be found to be null and void and author of document may be subject to penalty of law.**

\_\_\_\_\_  
Citizens Signature  
Complaint/Signature

Date of

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### **City Official Response**

**Date Action Taken** \_\_\_\_\_ **Addressed at a City Council Meeting:** Yes \_\_\_ No \_\_\_ **Date** \_\_\_\_\_

**Action Taken to Resolve:**

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**Handled by:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Time:**

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City Official's Signature

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Date