

RUSH TOWNSHIP COMPLAINT FORM

Date: _____ Time Received: _____

Type of Complaint: (i.e. road, sewer, etc.) _____

Person Filing Complaint: _____

Address: _____

Telephone No.: _____

Nature of Complaint: _____

Signature

This Section To Be Completed By Township

Person Receiving Complaint: _____

Action Required: Yes _____ No _____

Corrective Action Taken: _____

Signature of Investigating Official