TOWNSHIP OF SMITH

COMPLAINT INFORMATION

MUST HAVE NAME, ADDRESS, PHONE No. & SIGNATURE of COMPLAINT or will not be accepted!

DATE COMPLAINT FILED: _____

COMPLAINTANT'S NAME: _____

COMPLAINTANT'S ADDRESS: _____

PHONE: _____

ADDRESS OF COMPLAINT: _____

COMPAINT:

_____

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SIGNATURE OF COMPLAINTANT: _____

(If not signed or filled out completely this complaint will be disregarded)

This form can be emailed (secretary@smithtownship.org or planning@smithtownship.org), faxed to (724-947-2715) or mailed.