

PORT CARBON BOROUGH
301 First Street
Port Carbon, PA 17965
570-622-2255

Date Received

COMPLAINT

Complainant's Name (print): _____

Phone # _____ - _____ - _____

Address (Number & St, Rd, or Dr) _____

Town/City, State, & Zip Code _____

Description of Complaint/Problem (include Name and address / location of complaint):

Signature of Complainant: _____

OFFICIAL USE ONLY

Referred to:

Road Department Zoning / Code Enforcement Police Solicitor

Engineer Boro Council Planning Commission Other

Action Taken:

Contact Made by: _____ Date: ____/____/____

Complainant: Satisfied Not Satisfied