

# GLENBURN

*We're on  
the way!*

Phone (701) 362-7544

Fax (701) 362-7509

## \*\*\*COMPLAINT FORM\*\*\*

### RESIDENT INFORMATION:

NAME	HOME TELEPHONE NUMBER
STREET ADDRESS & MAILING ADDRESS (if different)	WORK TELEPHONE NUMBER
CITY / STATE / ZIP	

### COMPLAINT:

(15 lines for writing the complaint)

### SIGNATURES:

I understand this complaint form will be presented at the next regular Glenburn City Council meeting for the Glenburn City Council to address.

RESIDENT SIGNATURE <b>X</b>	DATE
RECEIVED BY <b>X</b>	DATE