



REQUEST FOR SERVICE

 Date Received by Village

PLEASE CHECK THE APPROPRIATE DEPARTMENT:

_____ Village Manager _____ Dept. of Public Works _____ Zoning Office
_____ Police Department _____ Utility Department _____ Village Council

INQUIRER OR COMPLAINANT:

Name: _____ Phone Number: _____

Address: _____

SUBJECT PROPERTY OF INQUIRY OR COMPLAINT:

Address: _____ Owner: _____

Occupant: _____ Phone Number: _____

NATURE OF INQUIRY OR COMPLAINT:

Enter Complaint:

DATE AND ACTION TAKEN:

Action:

Date: _____