

Village of Lake Nebagamon Complaint Form

Date of Complaint: _____

Person/Persons Registering Complaint (with address and contact information phone/email):

MUST BE COMPLETED OR NO ACTION WILL BE TAKEN

Property in Question (address/fire number): _____

Property Owners: _____

Complaint: _____

Supporting Documentation: _____

*****FOR VILLAGE USE ONLY*****

Date Received: _____

Followed Up By and Date: _____

Observations: _____

Action Taken: _____

Secondary Review By and Date: _____

Observations: _____

Action Taken by Secondary Review: _____

Date Complainant was Notified of Action: _____

RELATING TO: _____ Zoning _____ Sewer _____ Village Board