City of Sutton Citizen Suggestion / Request / Complaint Form

Date:	
Time:	(am / pm)
Citizen's name:	
Telephone number:	
Physical Address (location	of issue)
What is your Suggestion, F	Request, or Complaint to the City of Sutton? (please be specific)
Citizen's Signature:	
City Staff receiving informa	
N A (*- 1	(name) (signature or initial)
Issue Area: (circle one)	
Electric – Water – Tras Street/Road – Enforcemen	sh – Sewer – Security/Safety – Nuisances – Zoning – City Code nt – Animal Control Issues – Yard/Property Upkeep – Council Issue
	ee – Housing Agency Committee – Cemetery Committee
Tree Committ	tee – Community Redevelopment Authority Committee
Library Committee – Board	d of Adjustment – Public Works – Electric Dept. – Police – City Hall
To be filled in by the City	Administrator
City Department:	Contacted: Date:
Solution for Issue:	
	(date) Dept. Head: (initials)