



# VILLAGE OF BREMEN, OHIO

9090 MARIETTA ROAD SE  
P.O. BOX 127  
BREMEN, OHIO 43107

PHONE: 740-569-4788 FAX: 740-569-7085

## Public Complaint Form

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PO BOX: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

COMPLAINT: (be specific and include details) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

SIGNATURE: (if available) \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_

### INTERNAL USE ONLY

Complaint taken by: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_

Referred to: (if applicable) \_\_\_\_\_ Date: \_\_\_\_\_

Action taken: \_\_\_\_\_

\_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Follow-up with Citizen YES / NO \_\_\_\_\_ Date: \_\_\_\_\_

Method of follow-up: \_\_\_\_\_

By whom: \_\_\_\_\_

