

# CITY OF FLORENCE GENERAL COMPLAINT FORM

Please forward complaint to the City Secretary's Office to distribute to the Department Head regarding the complaint. Complaint's cannot be addressed unless the City has been notified.

**PLEASE PRINT OR TYPE**

Date: \_\_\_\_\_

### PERSON REGISTERING COMPLAINT

Name \_\_\_\_\_ Home # (\_\_\_\_) \_\_\_\_\_  
Address \_\_\_\_\_ Bus. #(\_\_\_\_) \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Business Name \_\_\_\_\_

### COMPLAINT REGISTERED AGAINST

Name of Person/Firm \_\_\_\_\_ Home # (\_\_\_\_) \_\_\_\_\_  
Address \_\_\_\_\_ Bus. #(\_\_\_\_) \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Business Name \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Lic # \_\_\_\_\_

### DETAILS OF COMPLAINT

Describe your complaint in sufficient detail. Include dates, times, locations, individuals and pictures. Attach pertinent documents, contracts, receipts, correspondence, etc. Use additional paper, if necessary.

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Have you talked with the person/firm being filed against? YES \_\_\_\_\_ NO \_\_\_\_\_

Name of Person with whom you have spoken to \_\_\_\_\_

Results: \_\_\_\_\_

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Signature \_\_\_\_\_

Date \_\_\_\_\_

Do not write below this line



Complaint Received Date \_\_\_\_\_

By \_\_\_\_\_

Action Taken \_\_\_\_\_

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