



**CITY OF LAMAR
CUSTOMER COMPLAINT FORM**

Date: _____

Name of person making complaint: _____

Telephone number: _____

Address: _____

Please check one.

- Water
- Sewer
- Electric
- Sanitation
- Park

Nature of complaint: _____

Person assigned to investigate complaint: _____

Results of investigation: _____

Action taken: _____

Date complainant was contacted with the results of the investigation and action taken: _____

Initials of person investigating complaint: _____

Initials of person taking complaint: _____

Work order #: _____

Date of completion: _____