TREMONT BOROUGH
139 Clay Street, Suite 1, Tremont PA 17981
Phone: 570-695-2199 Fax: 570-695-2232 Email: tbsec@wtvaccess.com

PUBLIC COMPLAINT FORM

All forms submitted must have a valid name and contact information on them so Borough Officials can verify the validity of the Complaint. Any Complaint turned in without this information will not be processed.

Name *and* Address of the Person, Business or Property whom Complaint is About:

_____

Explanation of your complaint:

_____

(Use back of form if needed)

I verify that the facts contained herein are true and correct to the best of my knowledge, information and belief. This verification is made subject to the penalties of section 4909 of the PA Title 18 relating to unsworn falsification to authorities.

Signature: _____ ***Printed Name:*** _____

Phone number: ( )_____ *Address:* _____

Date: _____

OFFICIAL USE ONLY

Report received by: _____ Date Received: _____

Referred to:_____