BOROUGH OF ROYERSFORD

300 MAIN STREET
ROYERSFORD, PENNSYLVANIA 19468
(610) 948-3737 • FAX (610) 948-2915

COMPLAINT/ CONCERN FORM

NAME : _____

ADDRESS: _____

PHONE NO. _____ E-MAIL: _____

DATE OCCURRED: _____

COMPLAINT/CONCERN IS BEING FILED AGAINST:

NAME: _____

ADDRESS: _____

DESCRIBE BELOW IN DETAIL THE NATURE OF THE COMPLAINT/CONCERN:
(If it is for an odor or noise please be specific as to date, time, and length of occurrence)

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(Use reverse side if necessary)

_____ _____

DATE SIGNATURE