



City of Chewelah
PO Box 258 – 301 E. Clay
Chewelah, WA 99109
509-935-8311

Complaint Form

Complaint Information:

Name: _____ Date _____

Address: _____

Phone Number _____ Best Time to Call _____

Location/Address of Complaint _____

Description of Complaint _____

Signature _____ Date _____

For Office Use Only

Received By: _____ Date Received : _____

Is this a new or established complaint? _____

Comments / Action Taken _____

Was Complaint Resolved? _____

If Yes, provide date. If No, provide reason why.
