



LOWER NAZARETH TOWNSHIP

623 MUNICIPAL DRIVE
NAZARETH, PA 18064
TELEPHONE: 610-759-7434
FAX: 610-746-3317

COMPLAINT FORM

Complainant's Name: _____ Date _____

Address: _____ Phone #: _____

Time Received: _____ Received by Phone: Yes No

Nature of Complaint:

- | | |
|---|--------------------------------------|
| <input type="checkbox"/> Administrative | <input type="checkbox"/> Traffic |
| <input type="checkbox"/> Drainage | <input type="checkbox"/> Zoning |
| <input type="checkbox"/> Road | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Sinkholes | |

Location: _____

Details: _____

Complainant's Signature: _____

Received By: _____

Routing: Manager Zoning Road Dept Keystone Consulting Asteak Law Offices
 Other _____ Original Copy Kept on File

Comments/Direction: _____

DISPOSITION

Date Acted Upon: _____ By Whom: _____

Action Taken: _____
