



# 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: \_\_\_\_\_

\_\_\_\_\_

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### DISPOSITION

Date Acted Upon: \_\_\_\_\_ By Whom: \_\_\_\_\_

Action Taken: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_