

COMPLAINT FORM

BOROUGH OF WEISSPORT
440 ALLEN STREET
WEISSPORT, PA 18235

Name of Complainant: _____

Address: _____ Phone #: _____

Nature of Complaint: _____

Owner of Complaint Property if Known: _____

Address of Complaint Property: _____

Have You Reported this Complaint Previously: YES ____ NO ____

Complainant Signature: _____

_____(Office Use Only)_____

Site Investigation Report: _____
