



CITY OF ADAMS

P. O. Box 67 • 7617 Hwy, 41 N
ADAMS, TENNESSEE 37010
PHONE (615) 696-2593 • FAX (615) 696-2220

CITIZEN COMPLAINT FORM

Complaints are taken seriously by the City of Adams. Please complete the form and return it in a sealed envelope to the office of the Mayor at City Hall or email to adamscityrecorder@bellsouth.net. Please complete all questions and sign the form.

DATE OF COMPLAINT: _____

LOCATION OF COMPLAINT: _____

GIVE THE NATURE OF COMPLAINT WITH ALL DETAILS: _____

(Use second page to continue if needed.)

WITNESSES TO THE INCIDENT. INCLUDE ADDRESSES AND TELEPHONE NUMBERS: _____

DATE _____ SIGNATURE

ADDRESS & PHONE NUMBER

INTEROFFICE USE ONLY:

DATE RECEIVED AT CITY HALL: _____

DATE RECEIVED BY MAYOR _____

DATE OF MEETING COMPLAINT ADDRESSED _____

NATURE OF COMPLAINT (CONTINUED) _____

Lined area for writing the nature of the complaint.