

COMPLAINT FORM

Borough of New Berlin
700 Water Street
PO Box 330
New Berlin, PA 17855

phone: (570) 966-4705
email: nbboro@dejazzd.com

**TYPE OR PRINT CLEARLY
ALL FIELDS MUST BE COMPLETED**

DATE: _____

YOUR NAME: _____

YOUR ADDRESS: _____

YOUR PHONE NUMBER: _____

NATURE OF COMPLAINT (circle):

- | | | |
|--------|-------------|------------------------------|
| Animal | Weeds/Grass | Rubbish/abandoned vehicle |
| Noise | Speeding | Other (please specify) _____ |

LOCATION OF ISSUE: _____

DATE(S) OF ISSUE: _____

BRIEF DESCRIPTION OF ISSUE including name(s) of alleged violators

_(use back if more space needed)_____

**HOW CAN THE SITUATION BE REMEDIED? WHAT ACTION WOULD
COMPLAINANT LIKE TO SEE OCCUR?**

You can submit this form in person at the Borough Office during regular business hours, or mail, or email to the above addresses. All complaints must be in writing - please do not call office.

For office use only:

Date received: _____ *Referred to:* _____

Results of review: _____

Close date: _____