

DUNN CENTER
— NORTH DAKOTA —
3 Main St. West
Dunn Center, ND 58636
CONCERN/COMPLAINT FORM

To submit a concern/complaint, please complete and submit this form in its entirety. We must have an address of the location of the complaint. If the complaint is about the inside of a dwelling, the complainant portion and complainant signature must be complete. If the form is incomplete the complaint will not be processed and will be returned for further information.

Date _____

Location Name: _____

Address: _____

City, State, Zip _____ Phone _____

Complaint Description: _____

Complainant Name: _____

Address: _____

City, State, Zip _____ Phone _____

Owner/Offender Name: _____

Address: _____

City, State, Zip _____ Phone _____

Complainant Signature: _____

Office Use Only

First Offense (date) _____ Action Taken _____

Second Offense (date) _____ Action Taken _____

Third Offense (date) _____ Action Taken _____