



Town of Minetto
6 COMMUNITY DRIVE
PO BOX 220
MINETTO, NEW YORK 13115-0220
315 • 343-2393 Fax: 315 • 342-4421

Resident Complaint Form

Complaint No: _____ Filing Date: _____

TO: Minetto Town Supervisor

Complainant's Name: _____

Complainant's Signature: _____

Address: _____

Mailing Address if Different: _____

Phone: _____

Nature of complaint: _____

Date Activity Occurred: _____ Department: _____

Person Assigned to complaint: _____

Supervisor's Signature: _____

Nature of Resolution: _____

Add supplemental report if necessary.

Completion Date: _____