

Office Use Only

Complaint # \_\_\_\_\_

# City of Emily Complaint Form



Please select the area in which this complaint concerns:

- City Staff
- Fire Department
- Police
- Mayor/Council
- CityHall
- Streets
- Parks
- Ordinance Violation
- Other (please specify) \_\_\_\_\_

Address of problem: \_\_\_\_\_

Or Name of person complaint regarding \_\_\_\_\_

Describe in detail the problem or violation: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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Investigated By: \_\_\_\_\_

Actions / Procedures Followed: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Return completed form to:

City of Emily  
 39811 State Highway 6 (218) 763-2480  
 PO Box 68 (218) 763-2481 fax  
 Emily, MN 56447 [clerk@emily.net](mailto:clerk@emily.net)

*All personal information  
 confidential pursuant to  
 MN Statute 13.43 and/or 13.44*

**COMPLAINANT INFORMATION:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_