

ROAD/DRAIN COMPLAINT FORM

ERIE TOWNSHIP ERIE, MICHIGAN

Date: _____

COMPLAINT AGAINST _____ Road

_____ Drain

Name of Road or Drain: _____

Location of problem: _____

Nature of complaint: _____

Person registering complaint: _____

Name

Address

Phone

Complaint taken by: _____

Faxed to: _____ Monroe County Road Comm. _____ Monroe County Drain Comm.

Date: _____