

Record of Complaint / Concern

Village of Ravenna, MI

Date: _____ Number #20 -

Work order #: _____ Account # _____

Name of person (s) filing the complaint: _____

Phone Number: _____

Property Address: _____

Nature of Complaint / Concern: _____

Taken by: _____

Assigned to: _____

Resolution: _____

Date Resolved: _____