



City of Fountain
104 Main Street
PO Box 115
Fountain, MN 55935

Please select the area in which this complaint concerns:

- Neighbor, City Staff, Parks, Wastewater Department, Streets, Other (please specify)

Notice under the Minnesota Government Data Practices Act: The City of Fountain collects your personal information on this form to help investigate the complaint and inform you of the results.

Name: Phone:

Address:

Please indicate below your complaint or concern:

Blank lines for complaint description

Signature of Complainant: Date:

Please return completed form to City Hall

Office Use Only

Date Received: Resolved: YES NO Pending: YES NO

Date Given to: City Council: Mayor:

Police Chief: City Maintenance:

Action Taken: See Reverse Side

Date of Response to Complainant: