



**FORD CITY BOROUGH**  
P.O. Box 112 • 1000 4TH AVENUE  
FORD CITY, PA 16226  
PHONE: 724-763-3081  
FAX: 724-763-3080  
[www.fordcityborough.org](http://www.fordcityborough.org)

## CITIZEN COMPLAINT FORM

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Ford City Borough welcomes residents and taxpayers to express complaints regarding non-emergency matters in the borough for borough officials to address. This form exists to document citizen complaints as well as ensure the correct departments are informed of the issues to reach a resolution. This process is designed to improve Borough conditions and services for residents of Ford City. This form shall not be utilized for complaints regarding: (i) a decision of Borough Council; (ii) internal employee complaints, (iii) matters addressed by legislation or an existing federal, state, or local law, ordinance, resolution, or regulation, and (iv) matters that are handled by tribunals, courts of law, quasi-judicial boards, etc.

If there is a matter that you would like to formally express concern about with the Ford City Borough, please fill out this form and submit it to the Ford City Borough Office. Once the office receives the form, it will be routed to the appropriate department. All forms submitted will be resolved in a timely manner.

The Borough shall handle all complaint forms and information contained therein with the utmost respect for privacy, and, unless required by law (including the Pennsylvania Right-to-Know Law), subpoena, or legal order, will make reasonable efforts to ensure that personal information contained within the complaint form is not disclosed to the public.

### Person Submitting Complaint:

I am a Council Member submitting this form on behalf of a constituent. Name: \_\_\_\_\_

Complainant Name: \_\_\_\_\_

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

Complainant Phone: \_\_\_\_\_

Complainant Email: \_\_\_\_\_

### Details of Complaint:

Name (If possible): \_\_\_\_\_

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

Please explain in as much detail as possible the complaint you are submitting. If you have any attachments that would be helpful to us resolving your complaint, please attach them to this form.

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**Incomplete forms shall not be accepted.** To be considered complete, the form must include (i) the complainant's name, (ii) the complainant's contact information, and (iii) a description of the complaint. Citizens and taxpayers are also encouraged to include or attach with their form any supporting documentation or evidence, if applicable.

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Signature

Date

Time

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**INTERNAL USE ONLY**

**To be completed by Borough Office Staff upon receipt:**

Date Received: \_\_\_\_\_ Time Received: \_\_\_\_\_

Received by: \_\_\_\_\_ Routed to: \_\_\_\_\_

Received Via: Email  Mail In-Person      Confirmed Via: Email Mail  In Person

Signature of Recipient: \_\_\_\_\_

Once completed form is received – Make a copy for the resident and for the citizen complaint book. **This copy shall serve as notification to the complainant to verify receipt.** The form will then need to be routed to the appropriate borough official. Once the form is in the appropriate hands and there is a response or resolution to the complaint, it will be documented below, and the concerned resident will be notified of the response within fifteen (15) business days, if able.

Response: (Attach additional pages, if necessary.)

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Signature of Respondent

Date

Time