IVINS CITY
85 N. Main St. • Ivins, UT 84738
Tel. 435-628-0606 • Fax 435-656-2286
www.ivins.com

COMPLAINT RECORD AND RESPONSE

COMPLAINT

Please Print

Date _____ Name _____

Address _____ Telephone _____

Please give as much detail as possible of incident or action.

Date of Incident _____

Location _____

Detailed Explanation

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Signature _____

CITY STAFF RESPONSE

Department Head _____ Date _____

Response and/or action taken:

Signature _____ Signature _____
Department Head City Manager