City of Hazel Park
Citizen Comment/Complaint Form

Last Name- (required) First Name- (required)

Address- (required)

City State Zip

( ) ( )

Home Phone-(required) Business Phone or Day Phone-(required)

Your contact was by:

Phone In-Person In writing

Other (Please Specify)_____

Please describe your complaint or comment in detail. Give the date, the name of the person, if applicable, that was involved and any information that will help us investigate your complaint or comment.

Once the complaint or comment is received, it will be reviewed and you may be contacted for further information. Thank you.