

ISSUE REPORTING FORM

THE TOWNSHIP HANDLES A WIDE VARIETY OF LOCAL MUNICIPAL ISSUES. PLEASE DESCRIBE YOUR ISSUE AS CLEARLY AS POSSIBLE SO THE CONCERN MAY BE FORWARDED TO THE CORRECT DEPARTMENT AS QUICKLY AS POSSIBLE. SUBMIT THE COMPLETED FORM BY U.S. MAIL, FAX OR EMAIL TO THE ADDRESS BELOW.

MY CONCERN IS ABOUT:

SUMMARY OF ISSUE:

LOCATION OF ISSUE/INCIDENT:

VIOLATOR(S) INFORMATION (*name, address, etc. if known*)

YOUR INFORMATION:

NAME: _____ E-MAIL: _____

ADDRESS: _____ PHONE: _____

SIGNATURE _____ DATE: _____

PLEASE CHECK BOX IF THIS COMPLAINT IS TO BE CONFIDENTIAL. CONFIDENTIAL COMPLAINTS ARE PROCESSED IDENTICALLY TO STANDARD COMPLAINTS, WITH THE EXCEPTION THAT THE COMPLAINANT INFORMATION IS WITHHELD. PLEASE NOTE THAT REQUESTING CONFIDENTIALITY MAY LIMIT ADVANCED COMPLIANCE EFFORTS SUCH AS CITATION OR TRIAL.

SIGNATURE REQUESTING CONFIDENTIALITY

PLEASE RETURN COMPLETED FORM TO: Schuylkill Township
Attn: Township Manager
111 Valley Park Road
Phoenixville, PA 19460-5766
(610) 933-5843 ofc (610) 933-4428 fax
admin@schuylkilltwp.org
