



529 Shed Road
Newville, PA 17241
717-776-6121 phone/fax
lowermifflintwp@embarqmail.com

COMPLAINT FORM

Date of complaint: _____

Complaint by: _____

Property in Violation:

Address: _____

City, State & Zip: _____

Owner of Property in Violation: _____

Nature of complaint:

Complainant Information:

Name: _____

Address: _____

Cell number: _____

The above information is accurate to the best of my knowledge. I also understand that the township may need my testimony in any court proceeding, which may result from my complaint.

Signature

Date of Signature

For office Use Only

Violation # _____

Date Received: _____

See Reverse Side for Action Taken and Follow-ups