COMPLAINT FORM
ERIE TOWNSHIP
ERIE, MICHIGAN

Date: ____________________

COMPLAINT AGAINST: ☐ Resident ☐ Police Department
☐ Township/Staff ☐ Fire Department
☐ Other

Person/Name: ___________________________________________________________

Location/Address: ______________________________________________________

Nature of complaint: ____________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Person registering complaint: ____________________________________________

(Contact information is not required, but may be helpful if we need additional information)

Name

Address

Phone

Complaints are handled by various departments depending on the nature of the complaint.

Completed forms may be returned:
In Person: Erie Township Hall – 2065 Erie Rd. – Erie, MI – 48133
US Mail: Erie Township – PO Box 187 – Erie, MI – 48133
Email: kcousino@erietownship.com

This section for Township Use
Complaint Received/Taken by: _____________________________ Date: __________
Forward to: _____________________________________________ Date: __________