Village of Cuba Village **SNOW** Snow Removal Complaint Form Case # Year - Complaint Number Name of Complainant: Address of Complainant: Email address of Complainant Phone # of Complainant Address of suspected violation Description of the problem (be specific) Signature of Complainant: x Office Use Only Complaint received by: time/date to: time/date SPW Investigation findings: in violation not in violation Courtesy Notice #____left at (address of suspected violation) (time) (date) Remedy required: DPW cleared sidewalk billing sent Owner/Occupant cleared sidewalk

Revised:

15-Jan-07