CITIZEN'S INPUT FORM

Please complete the following information so that the City of Casey may properly address.

Please Print Date:_____

Name:_____ Address: _____

Phone:_____ Email Address:_____

Address / Intersection / location of Issue_____

State your issue/comment/request/complaint/suggestion and how you feel it should be resolved:

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Signature:_____

All complaints must be signed, dated, and notarized to be considered valid.
~City Clerk can notarize the form if needed~

Subscribed and affirmed before me in the County of _____, State of Iowa, this _____day of _____, 20____.

_____ _____
Notary Official Signature Notary Seal/Stamp

For Office use only:

Date received:_____ Received by:_____

Addressed at Council Meeting ( ) Yes Date:_____ ( ) No
Action:_____

_____

Response to Citizen ( ) Yes ( ) No If so, When:_____How_____