

Board of Trustees
Village of Black River, New York



COMPLAINT RECORD

Complaint No. _____

Date Received _____

Received By _____

Complaint Location:

Apt. # _____

Lot # _____

Other _____

Street Address _____

Village of Black River, County of Jefferson County

Complainant Name _____

Address _____

Phone _____

Complainant is:

Tenant _____ Landlord _____ Official _____ (Title) _____

Other _____

Nature of Complaint: _____

Complainant Signature _____