

TOWNSHIP OF LIBERTY

COMPLAINT FORM

DATE	::	
TO:	ROAD SUPERVISOR ZONING OFFICIAL CONSTRUCTION OFFICIAL OTHER:	
FRON	И:	
OHQ	NE:	
SUM	MARY OF COMPLAINT OR ISSUE:	
RESP	ONSE REQUESTED	
NO R	ESPONSE REQUESTED	
FOLL	OW UP RESPONSE:	
SIGN	ATURE:	
DATE	::	