



# CITY OF BLUE RIDGE

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## General Complaint Form

Date \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Contact Number \_\_\_\_\_ Email \_\_\_\_\_

Please use this if you have a general complaint to make to the City of Blue Ridge.

Complaint:

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Resolution:

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_____	_____	_____
Date Received in Office	Time	City Employee
_____	_____	_____
Date Notified of Resolution	Time	City Employee