



Address:
100 3rd Ave SE
Pacific, WA 98047

Phone:
(253) 929-1110

Website:
<https://www.pacificwa.gov>

CITIZEN COMPLAINT FORM

Reporting Party Information:

This section must be completed before City of Pacific can act on this matter. Anonymous complaints are not accepted.

Name: _____

Address: _____ City / State / Zip: _____

Phone Number: _____

Email Address: _____

PLEASE NOTE: THIS FORM IS A PUBLIC RECORD AND MAY BE DISCLOSED BY THE CITY IF REQUESTED.

Confidentiality Preference: If you believe that disclosure of your identity would threaten your safety or property, you may request that your identity not be disclosed under RCW [42.56.240\(2\)](#). Be advised, your request is not a guarantee that your identity will be protected from disclosure. Disclosure of information revealing your identity will depend on a number of factors including Chapter [42.56](#) RCW (the Public Records Act), other applicable laws, and whether the complainant is criminally prosecuted. With that understanding, PLEASE INDICATE YOUR DESIRE FOR DISCLOSURE OR NON-DISCLOSURE OF YOUR IDENTITY BY CHECKING THE APPROPRIATE BOX, AND SIGN AND DATE BELOW:

My Identity can be disclosed Do not disclose my identity. I believe disclosure would threaten my safety or property.

Signature: _____ Printed Name: _____ Date: _____

Address or Location of Complaint: _____

Type of Complaint:

Animals		Permitting/Zoning	
<input type="checkbox"/>	Rodents	<input type="checkbox"/>	Clearing/Grading/Construction without permits
<input type="checkbox"/>	Stray/Uncontrolled/Vicious/Loud Barking	<input type="checkbox"/>	Use not authorized
<input type="checkbox"/>	Unauthorized (number/type)	<input type="checkbox"/>	
Buildings		Public Right-of-Way	
<input type="checkbox"/>	Abandoned/Unoccupied	<input type="checkbox"/>	Graffiti/Litter
<input type="checkbox"/>	Fencing/Retaining Walls	<input type="checkbox"/>	Unauthorized Parking/Structures
<input type="checkbox"/>	Inoperable Vehicle(s)	<input type="checkbox"/>	Vegetation Blockage: Alley/Sign/Sidewalk/Street
<input type="checkbox"/>	Junk/Refuse/Debris/Overgrown Vegetation	Other	
<input type="checkbox"/>	Noise	Explain On Backside of this Form	

Nature of Complaint: _____

OFFICE USE ONLY			
NOTES:		Date Complainant Contacted:	
		Contacted By:	
		Date Closed:	
		Date Received:	
		TRACKING NUMBER:	