

# Division of Citizen Participation Citizen Contact Form

Revised: 7-91

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Date Received: \_\_\_\_\_ Intake By: \_\_\_\_\_

Information Came Via:

Telephone  Meeting  Correspondence  Admin. Council  Walk In

Received From: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Problem Location \_\_\_\_\_ Zip Code \_\_\_\_\_

Safe School Zone? Yes  No  Name of School(s) \_\_\_\_\_

Complaint  Technical Assistance  Social  Problem Code: \_\_\_\_\_

Description \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Staff Person Assigned \_\_\_\_\_

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Date Referred \_\_\_\_\_ Days Until Referral \_\_\_\_\_

Referred To: Agency \_\_\_\_\_ Agency Code \_\_\_\_\_

Person Contacted \_\_\_\_\_

Response \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Attention, Neighborhood Development staff. Please write compliance date here \_\_\_\_\_

Person Responding: \_\_\_\_\_ Date: \_\_\_\_\_

Status: Open  Closed Resolved  Closed Answered  Date Closed \_\_\_\_\_ Days Open \_\_\_\_\_

Demographics: Priority Board \_\_\_\_\_ Planning District \_\_\_\_\_

Seat/Precinct \_\_\_\_\_ Neighborhood Assoc. \_\_\_\_\_