



# CITY OF BANGOR

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Bangor, Michigan 49013  
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## CITIZEN COMPLAINT FORM

### Why a Complaint Form

Citizens have a right to register complaints regarding the conduct of City employees. Citizens also have a right to complain about policies and procedures of the City. This form exists to document citizen complaints and the response of the City. It is hoped that this process will help to improve the services of the City to all residents and property owners.

### Impartial Review and Fairness... That's the Goal

The City of Bangor adheres to a policy of investigation all allegations of misconduct or complaints regarding employees, policies or procedures of the City. The goal of the City is to ensure that objectivity, fairness, consistency and justice is assured by a thorough impartial investigation and/or review of your complaint.

Unless the complaint and allegation is of such magnitude that it requires additional tie for review, all complaints will be resolved as soon as possible. During the course of the investigation, the City Manager or his/her designee will notify you concerning the status of your complaint. The City Manager will notify you of the findings of the investigation and/or review of the City. However, the City cannot, by law, discuss any individual personnel actions that may result from your complaint.

### **Please fill out all items below:**

1) YOUR NAME: \_\_\_\_\_

2) YOUR ADDRESS: \_\_\_\_\_

3) YOUR DAYTIME TELEPHONE NUMBER: \_\_\_\_\_

4) YOUR EVENING TELEPHONE NUMBER: \_\_\_\_\_

5) IS THE COMPLAIN REGARDING...

A CITY EMPLOYEE: YES

*(If so, please complete the rest of the form.)*

A CITY POLICY OR PROCEDURE YES

*(If so, skip to question #10)*

6) DATE OF THE INCIDENT OR COMPLAINT: \_\_\_\_\_

7) TIME OF THE INCIDENT OR COMPLAINT: \_\_\_\_\_

8) LOCATION OF THE INCIDENT OR COMPLAINT: \_\_\_\_\_

9) WHO ELSE MAY HAVE WITNESSED THE INCIDENT OR MAY HAVE SEEN THE INCIDENT?

Name: \_\_\_\_\_ May we contact them YES  NO

10) NATURE OF THE COMPLAINT: *(Attach additional sheets if necessary)*

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11) YOUR SIGNATURE: \_\_\_\_\_

12) TODAY'S DATE: \_\_\_\_\_

<b>For Internal Use Only:</b> To be completed by the City Manager	
City Manager's Name:	
Date Complaint Received:	Time Received:
Routed or Handled by City Manager:	Routed To:
	City Manager: <i>(Initial)</i>

