

Baldwin Township

1119 Monument Road, Tawas City, MI 48763

Complaint Form

Date Recieved: _____

Received By: _____

Complaint Number: _____

Complainant: Understand by signing this form, you might be called as a witness in case of court action.

Name: _____ Phone#: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Signature: _____

Complaint Concerning: *Please provide as much information as possible, if known.*

Name: _____ Phone#: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Complaint: *Be specific, use additional paper if necessary.*

Violation of Ordinance _____

Follow-up Action: By what method(s) have you tried to resolve this issue on your own? (Be specific.):

Zoning Administrator: _____

Supervisor: _____

Cathy Pittsley
Clerk

Baldwin Township Board

Patricia Spriggs
Treasurer

Clifford Miller
Trustee

Christopher Martin
Supervisor

David Hoin
Trustee