

City of South Milwaukee

Date _____

Citizen Comment Form

This form may be used by citizens to provide comments or report concerns regarding City of South Milwaukee services or contacts. ***Please use the Property Maintenance Reporting Form to provide information regarding property maintenance issues.***

Please provide your contact information. Include your full name, address, telephone number, and email address, if applicable.

Name: _____

Address: _____

Phone: _____

Email: _____

If your comment or concern has to do with a specific City department, please indicate which department below:

- | | |
|--|---|
| <input type="checkbox"/> Administration | <input type="checkbox"/> Engineering |
| <input type="checkbox"/> Street Department | <input type="checkbox"/> City Clerk or Treasurer's Office |
| <input type="checkbox"/> Senior Center | <input type="checkbox"/> Health Department |
| <input type="checkbox"/> Water Utility | <input type="checkbox"/> Wastewater Treatment Facility |
| <input type="checkbox"/> Police Department | <input type="checkbox"/> Fire Department |
| <input type="checkbox"/> Other | |

Please complete the space below and provide details regarding your comment or concern:

Please return this form:

City Administration Building
2424 15th Avenue, or by fax: 414-768-8068.

OR maciejewski@smwi.org

**** OFFICE USE ONLY ****

REFERRED TO: _____

Please indicate action required and/or taken and return to the City Administrator's office within TEN (10) working days. ACTION TAKEN: _____

