



City of Jordan Complaint/Concern Investigation Form

Complainant Information

Name of Person Reporting the Complaint/Issue: _____

Address & Phone of Complainant: _____

Complainant Signature: _____

Name and Phone Required (Sorry, the City won't follow up on anonymous complaints)

Details of the Complaint

Nature of Complaint:

Date Complaint Filed: _____

Received By: _____

Investigation Summary

Investigation Summary:

Investigated By: _____

Date of Investigation: _____

Results or Corrective Actions Taken

Results or Corrective Action Taken: Action is needed? : YES ___ NO ___ (why not?)

Officer Preparer and Reply to Complainant

Prepared By: _____

Date: _____

Signature: _____

Reply Received Sign: _____