



City of Olmsted Falls

Resident Complaint Form

Name: _____	Date: _____
Address: _____	Company: _____
Phone No.: _____	Email: _____

Complaint:

(Please include nature of complaint, date and time, if applicable, amount of time incident involved, frequency of occurrence and any other pertinent information)

Please mail to: City of Olmsted Falls, 26100 Bagley Road, Olmsted Falls, Ohio 44138 Attn: Mayor's Office or email at: amdonegan@olmstedfalls.org

For administration use ONLY

Disposition/Resolution: _____

Closed _____ Open (Unable to Resolve) _____

Disposition By (Signature): _____

Print Name: _____ Date: _____

Refer to:					
Mayor	Finance	Law	Clerk	Economic Dev.	Building
Service	Police	Fire	Business/Community Services	Other: _____	