

**City of Weston  
Citizens Concern Form**

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Please check the ward in which you reside.

Ward I/S. Rogers     Ward II/R. Bohan     Ward III/G. Foster     Ward IV/H. Curtis

Address or location of your concern.

Ward involved: \_\_\_\_\_

\_\_\_\_\_

Date of occurrence: \_\_\_\_\_

Please describe your concern.

\_\_\_\_\_  
\_\_\_\_\_

What would you like to see happen with this situation?

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Citizen

**Office Use Only**

Department Involved:     Building     Fire     Police     Street

Forward To Other Agency's Involved: \_\_\_\_\_

Agency: Please contact the city's Administrative Assistant with your resolution

**Department Head: Follow up with the citizen and city's Administration within "72" hours of complaint to update.**

Date of Follow up: \_\_\_\_\_

Type of Follow up:     Phone Call     In Person

Date Investigated: \_\_\_\_\_

Date Resolved \_\_\_\_\_

Resolution: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Department Head \_\_\_\_\_

Date: \_\_\_\_\_

City Manager \_\_\_\_\_

Date : \_\_\_\_\_