



The City of Hoisington

109 E. First St.

P.O. Box 418

Hoisington, KS 67544

Complaint Form

First Name: _____ Last Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Work (or Cell) Number: _____

Violation Address: _____

Type of Complaint:

- | | |
|--|--|
| <input type="radio"/> Advertising Signs | <input type="radio"/> Plumbing |
| <input type="radio"/> Animals / Foul Odor | <input type="radio"/> Railroads |
| <input type="radio"/> Building Codes | <input type="radio"/> Sewer / Drainage |
| <input type="radio"/> Care of Premises | <input type="radio"/> Staff Conduct |
| <input type="radio"/> Criminal Code | <input type="radio"/> Streets & Sidewalks |
| <input type="radio"/> Electricity | <input type="radio"/> Swimming Pool |
| <input type="radio"/> Fire Prevention & Protection | <input type="radio"/> Trash & Garbage |
| <input type="radio"/> Housing | <input type="radio"/> Tree & Shrubs |
| <input type="radio"/> Inoperable Vehicle (s) | <input type="radio"/> Vacant Lots |
| <input type="radio"/> License / Taxation | <input type="radio"/> Water (Pools & Stagnant) |
| <input type="radio"/> Litter | <input type="radio"/> Weeds & Noxious Growth |
| <input type="radio"/> Noise | <input type="radio"/> Zoning |
| <input type="radio"/> Nuisance | |
| <input type="radio"/> Other: _____ | |

Comments:

Disposition made by (Signature): _____ Date: _____

Approved: _____ Date: _____