

**City of Yreka Complaint Form**

**Complaint** – Describe problem: (attach additional sheet if necessary)

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

Location – Property address: \_\_\_\_\_  
or general location \_\_\_\_\_

Name of person submitting complaint: (please Print) \_\_\_\_\_

Address \_\_\_\_\_

**Day-time telephone number** \_\_\_\_\_

e-mail address (optional) \_\_\_\_\_

\_\_\_\_\_  
Signature

Date \_\_\_\_\_

Please submit this complaint form to the City of Yreka 701 Fourth Street, Yreka, CA 96097

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For Internal Use only: Original form filed with City Clerk, City Clerk to distribute form to the appropriate department as determined by City Manager for review and action:

- Building Official                       Director of Public Works    Finance Director
- Chief of Police                               Planning Department               Water Department
- Animal Control                               Code Enforcement

Informational copy distributed to  Code & Contact

City Manager