



CITY of BANDERA

511 Main Street
P.O.Box 896
Bandera, Texas 78003-0896
830.796.3765
cityofbandera.org

City Ordinance Citizen Complaint Form

Please complete the following information so that the Code Enforcement Officer can investigate your complaint. Please print clearly.

Date: _____

Name: _____

Address _____

Phone Number _____

If requested will you attend a City Council meeting to explain your complaint?

Yes ___ No ___

Address of Complaint:

Nature of Complaint: (include the all facts of your complaint)

Explain how you feel the complaint should be resolved:

Should a citation be issued, you may be required to testify to the above complaint in a Court of Law. Do you agree to so testify? Yes ___ No ___

(If you check No it is possible that the City will not take any action on your complaint.)

All complaints must be signed and dated to be considered valid.

(Name)

(Address)

CODE ENFORCEMENT OFFICER USE ONLY

Received by: _____ Date: _____

Comments: _____

