

COMPLAINTS

Village of Williams Bay, Wisconsin

Date _____

Verbal _____

Telephone _____

Letter _____

Nature of Complaint: _____

Made by: _____

Address: _____

Signature of Complainant: _____

Signature of Village Clerk: _____

Street Dept. _____

Water Dept. _____

Health Dept. _____

Police Dept. _____

Sewer Dept. _____

General _____

