

**VILLAGE OF NEW BADEN  
MUNICIPAL COMPLAINT FORM**

(return to Village Hall via mail, front desk, or night deposit box)

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

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

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

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

Department Directed to:

Police: \_\_\_\_\_

Fire: \_\_\_\_\_

Water: \_\_\_\_\_

Policy: \_\_\_\_\_

Laws: \_\_\_\_\_

Sewer: \_\_\_\_\_

Streets: \_\_\_\_\_

Nuisances: \_\_\_\_\_

Cemetery: \_\_\_\_\_

Other: \_\_\_\_\_

**PLEASE STATE BRIEFLY YOUR COMMENT**

\_\_\_\_\_  
SIGNATURE (S) OF PERSON FILING THIS CLAIM

\_\_\_\_\_  
SIGNATURE OF OFFICIAL RECEIVING STATEMENT