

BUTLER TOWNSHIP

PO BOX 339

BIGLERVILLE PA 17307

717-77-6712

COMPLAINT FORM

COMPLAINANT'S INFORMATION:

Printed Name: _____

Signature: _____

Address: _____

Phone #: _____ EMAIL: _____

COMPLAINT INFORMATION:

Location of Complaint: _____

Owner of Said Property: _____

Complaint Description: _____

Township Use

Date Complaint Received: _____

Follow- Up: _____
