



BOROUGH OF GLEN ROCK

P.O. Box 116
Glen Rock, PA 17327

(717) 235-3206

Fax (717) 235-0798

COMPLAINT FORM

Brief Description: _____

Name and Address of Resident filing the form: _____

Accessible Contact Phone Number: _____

Date Received: _____

Form Number: _____

Complaint referred to:

- ____ Street Dept
- ____ Zoning Dept
- ____ Council
- ____ Other

Action taken: _____

