



CITY OF STAR
10769 W. State St. / P.O. Box 130
Star, Idaho 83669
P: 208-286-7247 F: 208-286-7569

CITIZENS COMPLAINT FORM

Address Of Complaint: _____

or Location: _____

Name Of Property Owner (If Known): _____

Name Of Occupant (If Known): _____

Name Of Alleged Violator (If Known): _____

The Complaint Is Regarding:

Abandoned Vehicles
 Animal Control
 Accumulation of Refuse
 Damage To Parks
 Excessive Dog Barking
 Graffiti

Intersection Site Obstruction
 Noise/Glare/Vibration
 Open/Accessible Buildings
 Parking
 Other

Additional Complaint Details: _____

COMPLAINANT INFORMATION: (If all information below is not filled out, no action will be taken.)

Complainant's Name: _____

Complainant's Address: _____

Complainant's Phone #: _____ Fax: _____

Complainant's Signature: _____ Date: _____

***** For Office Use Only *****

Complaint Received By: _____ Date: _____ Forwarded To: _____

ACTION TAKEN: _____

Staff Processing Complaint: _____ Date: _____

Complainant Contacted With Results By: _____ Date: _____

Follow-Up Action Suggested/Required: _____

**Once turned into the City, this document becomes a public record and may be obtained by any individual(s) in accordance with Idaho State Code §9-338.*