

## TDPC Complaint Form

DATE: \_\_\_\_\_

FROM: \_\_\_\_\_

Address of plowed property: \_\_\_\_\_

Contact Information: Telephone Home or Cell: \_\_\_\_\_

E-Mail: \_\_\_\_\_

TO: TDPC Board Chair  
TDPC Plow Manger

To properly address this complaint, the TDPC will need the following information to resolve the complaint:

TYPE OF DAMAGE: \_\_\_\_\_

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Picture(s) if available are attached (Y) or (N): \_\_\_\_\_

Any other information concerning how this damage occurred: \_\_\_\_\_

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Resolution to this complaint: \_\_\_\_\_

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