



MS4 PUBLIC COMPLAINT FORM

The City of Pottsville • 401 North Centre Street • Pottsville, PA 17901
Phone: (570) 622-1234 • Fax: (570) 628-4418

RECEIVED

Date:	
Time:	

COMPLAINANT INFORMATION

(Information to be kept confidential or disclosed only in accordance with state and federal laws)

Name:	
Address:	
Phone #:	

NATURE OF CONCERN

- | | | |
|--|--|--|
| <input type="checkbox"/> Sediment from Construction Site | <input type="checkbox"/> Damaged Utility | <input type="checkbox"/> Suspect Pollutant Discharge |
| <input type="checkbox"/> Combined Sanitary with Storm | <input type="checkbox"/> Detention/Retention Pond | <input type="checkbox"/> General Question on MS4 |
| <input type="checkbox"/> Storm water Caused Damage to Home | <input type="checkbox"/> Ditch/Stream Bank Failure | <input type="checkbox"/> Flooding/Drainage Issue |

DESCRIPTION OF CONCERN

Specific Location:	
<i>Description: Please provide written statement of concern below and desired outcome. Also include pictures and copy of property survey is available. Utilize back side of this form or attached additional pages as needed.</i>	

SUBMIT

Below for City Use Only:

REFERRED TO:

- | | | |
|---|---|---|
| <input type="checkbox"/> City Administrator | <input type="checkbox"/> Streets Department | <input type="checkbox"/> Code Enforcement |
| <input type="checkbox"/> City Engineer | <input type="checkbox"/> City Solicitor | <input type="checkbox"/> Sewer Authority |
| <input type="checkbox"/> Fire Department | | |

RESPONSE:

- Further Investigation Required
- Issue Resolved
- Referred to Other Department
- Referred to State Agency