



## Woodstock Fire/Rescue District Citizen Complaint – Form

Incident # \_\_\_\_\_

Date Complaint Filed \_\_\_\_\_ Time Complaint Filed \_\_\_\_\_

Name of Complainant \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_

### Incident Information

Day \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_ ( ) am ( ) pm

Location \_\_\_\_\_

### Witnesses to This Incident (if known)

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

### Employees Involved in Incident (if known)

Name \_\_\_\_\_

Name \_\_\_\_\_

Name \_\_\_\_\_

Description of what happened. (Attach additional sheets if necessary)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please return to **435 E. Judd Street, Woodstock, IL 60098**. If you have questions, concerns or additional comments, please contact the Woodstock Fire/Rescue District at (815) 338-2621.