

MAYOR Donald A. Groesser

CITY COUNCIL

Timothy Brousek Lee Fideline Brian Kavanaugh Jerry Krause Michael Sanchez Ben Preis

CITY	OF	RALSTON					
Independence City							
RESIDENT	'S CC	MPLAINT FORM					

Date:
First & Last Name:
Address:
Phone Number:
Property Address in Question:
Property Owner's Name:
Nature of Complaint:



5500 South 77th Street Ralston, NE 68127-3896 (402) 331-6677 Fax (402) 331-4553 E-mail: cityhall@cityofralston.com

FOR INTERNAL USE ONLY

Ward Number:	Council Me	ember			
Applicable Ordinand	ce/Code				
Date Complaint Rec	eived	Reviewed by			
Copied to: Mayor Action Taken:	_Police Chief_	_Building Insp	_Fire Chief_	_C.A	_Clerk_