



## COMPLAINT FORM

Complaint From: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Date of Complaint: \_\_\_\_\_

Complaint via:      in person                  phone conversation

Complaint against: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Complain Lodged: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Taken by: \_\_\_\_\_

Action Taken: \_\_\_\_\_

\_\_\_\_\_

Pursuant to the provisions of the Pennsylvania Right to Know Act, this document and its contents MAY be subject to disclosure to any person filing a request for a copy with the Township. Right to Know Act request will be evaluated by Allen Township on a case by case basis in accordance with the requirements of the Right to Know Act.”

Some Complaints are clearly not subject to disclosure under §708(17). However, there is a possibility that the Complaint could be disclosed under certain circumstances.

