

CITIZEN SUGGESTION FORM

* 1 suggestion per form

Date: _____

Issue / suggestion:

Has issue / solution been addressed before? ___ yes ___ no

If yes, to whom did you report? _____

Approximate date: _____

If issue / suggestion was addressed before, what was the outcome?

Realistic solution: _____

Name: _____

Address: _____

Phone number: _____

Email: _____

**Name and phone number required or we will not respond to issue, however names will be kept confidential unless necessary to fix issue.

**Suggestions may/may not be brought up at council meetings due to time constraints.

**After suggestion is issued, please give ample time for Council consideration and we will reach out to you. Please remember we all have other duties outside of the City Council.