

COMPLAINT FORM SWORN STATEMENT

Fill out this form, date and sign it to register a complaint with Jasper County Environmental Health. If you have questions please call the office at 641-792-7603.

**Mail, fax or deliver to: Jasper County Environmental Health
County Annex Building
115 N. 2nd Ave. E
Newton, Iowa 50208**

Electronic versions must contain a signature and date and may be submitted to sirving@co.jasper.ia.us

Include the date and time the complaint is written, as well as, any dates and times named in the complaint.

One form for each person who is making a complaint.

Do **not** use words like he, she, we, or they use specific identifiers or names.

Ex. Instead of writing, "We were in the yard," write James, Mary and I were in the yard.

Do not include hearsay evidence only what you actually have seen or know to be true.

In general, complaints and complainants are public record. (The two main exceptions are personal medical records or if there is a situation of genuine public health risk with active disease.)

Use the back of the paper or attach additional sheets if needed.

COMPLAINT FORM SWORN STATEMENT

Printed Name of Person Making this Statement:

Last name
Address

First Name

Middle initial

City _____, State _____ Zip _____

Telephone Home (____) _____

Cell (____) _____

Work (____) _____

The best time of day and way to reach me is

Address and owner of property the complaint is about - (Any known contact information or phone numbers)
