



CITY OF BLACK DIAMOND

Citizen Feedback Form

PO Box 599 - 24301 Roberts Drive

Black Diamond, WA 98010

Phone: 360.851.4450 - Fax: 360.851.4451

Date: _____

☐ Compliment ☐ Comment ☐ Complaint ☐ Request ☐ Inquiry:

Citizen's Name: _____ Phone: _____

Mailing Address: _____

E-Mail Address: _____ Signature: _____

City Contacted by: ☐ Phone ☐ Letter ☐ in Person Taken By: _____

Department accepting form: _____

Forwarded to _____ Department; for Response within 5 working days.

Copy forwarded to: ☐ Mayor ☐ Administrator ☐ Clerk ☐ Police Admin.

Department Use only

Response or Action Taken by Department (required within 5 working days) _____

Date Action Taken: _____ By: _____

Citizen Notified by: ☐ Phone ☐ Letter ☐ in Person By: _____

File Original with City Clerk's Office. Five working Days to Respond.

Response must be forwarded to: ☐ Mayor ☐ Administrator ☐ Clerk ☐ Police Admin.