



CITY OF BANDERA

511 Main St. PO Box 896 Bandera, Texas 78003-0896

Concerned Citizen Form

Please complete the following form in its entirety, so the City of Bandera may look into your concern.

Do you wish to remain anonymous? YES NO

Name: _____ Today's Date: _____

Phone Number: _____ Address: _____

Location you would like the City of Bandera to look at: _____

Please explain: (include all facts) _____

You must, in good faith, make full, fair and honest, disclosure of all facts and circumstances known to you at the time this form is filled in.

I have read and agree to the above.

Signature

CITY USE ONLY

Received by: _____ Date: _____

Comments: _____
