

# BOROUGH OF HUNTINGDON

530 Washington Street  
Huntingdon, PA 16652

Phone: (814) 643-3966  
Fax: (814) 643-2644

Water  Sewer  Complaint Form

All of the following information is to be supplied before an investigation can be conducted. To the best of your knowledge, please thoroughly complete all of the sections.

Name: \_\_\_\_\_

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

\_\_\_\_\_

Telephone: \_\_\_\_\_

**NATURE OF COMPLAINT – Provide a full description of problem:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please be advised that as part of an investigation, it may be necessary to inspect and/or dye test your water/sewage system, as well as neighboring properties.

By submitting this complaint you are giving your permission for Borough employees or their representative/s permission to access your property for the purposes of the investigation.

Submitted By: \_\_\_\_\_ Date: \_\_\_\_\_

Complaint Received By: \_\_\_\_\_ Date: \_\_\_\_\_

In Person \_\_\_\_\_ Telephone \_\_\_\_\_ Internet \_\_\_\_\_ Other (Explain) \_\_\_\_\_

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

\_\_\_\_\_

Is Follow-Up Needed: \_\_\_\_\_ YES \_\_\_\_\_ NO

Explain Plan for Follow-Up: \_\_\_\_\_

\_\_\_\_\_

Employee/s Responding: \_\_\_\_\_

Date: \_\_\_\_\_