



CITIZEN INQUIRY FORM

Purpose: To establish better communication between City departments and the citizens of Coburg, by resolving inquiries related to policies and/or procedures.

Procedure: Submit completed inquiry form to the City Recorder. Your inquiry will be addressed by the appropriate Department and reported to City Council quarterly.

- Department:**
- Administration
 - Municipal Court
 - Public Works
 - Planning
- Budget/Finance
 - Police
 - Utility Billing
 - Other: _____

Inquirer Contact Information

Name: _____ Phone: _____
 Address: _____ Email: _____
 Mailing Address (if different than above) _____

Inquired Property/Location: _____

Explain (Question, Concern or Observation) please use back of form for additional space:

Signature: _____ **Date:** _____

Official Response (for internal use only):	
Signature of Department Head:	Date:
Signature of City Administrator:	Date: