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Office of  
the Selectmen  
Incorporated in  
1852

**TOWN OF FARMINGDALE**  
289 Maine Avenue  
Farmingdale, Maine 04344

**COMPLAINT FORM**

**Complainant:**

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

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

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

**Nature of Complaint:**

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

Person/Contractor believed to be responsible:

\_\_\_\_\_

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

**(Anonymous complaints will not be accepted)**

Received by: \_\_\_\_\_ Date: \_\_\_\_\_

Selectmen received: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\*\*\*

Action Taken :

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

**Responsible Person/Contractor :** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Road Commissioner** if applicable : \_\_\_\_\_ **Date:** \_\_\_\_\_

If more space is needed please use the back of this form. If attaching information please specify that there are attachments.