



Town of Bargersville  
Department of Storm Water Management  
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[www.townofbargersville.org](http://www.townofbargersville.org)

## STORM WATER MANAGEMENT PROGRAM STORM WATER HOTLINE FORM

COMPLAINT RECEIVED BY \_\_\_\_\_ DATE \_\_\_\_\_

NAME (Resident/Owner) \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

\_\_\_\_\_

HOME PHONE \_\_\_\_\_

DAYTIME PHONE \_\_\_\_\_

NATURE OF PROBLEM \_\_\_\_\_

(Flooding, erosion, construction sites, water quality, dumping, etc)

FREQUENCY OR DATE OF OCCURRENCE \_\_\_\_\_

LOCATION \_\_\_\_\_

DESCRIPTION OF PROBLEM \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

COMPLAINT REFERRED TO \_\_\_\_\_

COMPLAINT RESOLUTION \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Submitted to Storm Water Board Secretary: \_\_\_\_\_ (Date)