



CITY OF BLACK DIAMOND
Citizen Feedback Form
 PO Box 599 - 24301 Roberts Drive
 Black Diamond, WA 98010
 Phone: 360.886.5700 - Fax: 360.886.2592

Date: _____

- Compliment
 Comment
 Complaint
 Request
 Inquiry:

Citizen's Name: _____ Phone: _____

Mailing Address: _____

E-Mail Address: _____ Signature: _____

Department Use only

City Contacted by: Phone Letter in Person Taken By: _____

Department accepting form: _____

Forwarded to: _____ Department; for Response within 5 working days.

Copy forwarded to: Mayor Administrator Clerk Police Admin.

Response or Action Taken by Department (required within 5 working days) _____

Date Action Taken: _____ By: _____

Citizen Notified by: Phone Letter in Person By: _____

File Original with City Clerk's Office. Five working Days to Respond.

Response must be forwarded to: Mayor Administrator Clerk Police Admin.