TOWN OF MARLBORO, VERMONT - RESIDENT COMPLAINT FORM

For submission to the Select Board

Please use this form to share concerns about Town services, operations, policies, or employee conduct. Provide factual details and any requested resolution. You may attach additional pages if needed.

1. RESIDENT INFORMATION

Name: _____

Mailing address: _____

Phone: _____

Email: _____

2. COMPLAINT INFORMATION

Concern relates to (check all that apply):

☐ Town service or operation ☐ Road / Highway Department ☐ Town employee conduct

☐ Town policy or decision ☐ Town facility / property ☐ Other: _____

Date(s) of incident or concern: _____

Location / department involved: _____

Names of individuals involved (if known):

_____

3. DESCRIPTION OF CONCERN

Please describe what occurred, including relevant dates, circumstances, and any steps already taken:

_____

_____

_____

_____

4. REQUESTED RESOLUTION

What action or response are you requesting from the Town?

_____

_____

_____

5. SUPPORTING INFORMATION

☐ Supporting documents attached ☐ Witnesses or additional contacts identified in attachment

6. ACKNOWLEDGMENT

I confirm that the information provided is accurate to the best of my knowledge. I understand that the Select Board will review this submission and determine any appropriate follow-up. Submission does not guarantee a particular outcome. Records may be subject to disclosure under applicable Vermont law.

Signature (optional): _____

Date: _____

SUBMISSION

Submit to: Town of Marlboro Select Board, PO Box 154, Marlboro, VT 05344 | MarlboroSelectBoard@gmail.com

For immediate threats or emergencies, call 911. This form is not intended for emergency reporting.