



**CITIZEN COMPLAINT FORM**

**Mayor Johnny Magee**

City of Laurel  
401 N 5th Ave  
Laurel MS 39440  
Phone: (601) 428-6401

**Instructions:**

This form may be completed digitally or manually, but must be hand signed prior to submission. Please submit via email, regular mail or in person. Email to [mayor@laurelms.com](mailto:mayor@laurelms.com). The physical address is listed above.

**COMPLAINANT INFORMATION:**

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Telephone: \_\_\_\_\_

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

**City Department Cause of Complaint: (Check all that apply)**

City Hall

Fire Dept

Parks & Rec

Police Dept

Public Works/Zoning

Street

Water

Other: (Please explain) \_\_\_\_\_

**Incident Information in Detail:**

Location: \_\_\_\_\_

Name of City Employee Involved: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

All witness(es) Name and Phone Number:

\_\_\_\_\_

\_\_\_\_\_

**Reason for Complaint/Summary of Incident (Additional space on Page 2)**

I, \_\_\_\_\_, do hereby affirm that the above allegations made by me in this citizen's complaint report, are to the best of my knowledge and belief, true and based on fact.

Complainant Signature \_\_\_\_\_ DATE: \_\_\_\_\_



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**FORM SUPPLEMENT**

Attach additional pages if necessary:

A large, empty rectangular box with a black border, intended for attaching additional pages to the complaint form.