

**CITY OF EDGEWOOD**

**Request for action form**

Name of Citizen: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

Describe incident or occurrence (be specific as to exact date, location, etc.):

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

What action are you requesting?

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of citizen

\*\*\*\*\*

To be completed by City official

Date request form received in city office: \_\_\_\_\_

Request form forwarded to: \_\_\_\_\_

Action taken:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
City Clerk

After city action has been taken, a copy of completed form shall be mailed to Citizen, Mayor and City Council Members. Original form to be filed in City Clerk's office.

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NOTE: All request forms must be filled out correctly and **signed** by citizen. Unsigned forms will be destroyed by City Clerk upon receipt.