

2105

READING HEALTH DEPARTMENT  
COMPLAINT INTAKE FORM

Type of Complaint:	
Food	<input type="checkbox"/>
Housing	<input type="checkbox"/>
Solid Waste	<input type="checkbox"/>
Miscellaneous	<input type="checkbox"/>

Monday 11/10 - error date from Sunday here Monday  
 DATE: 9/18/05 TIME: 8:30 AM Voice mail

CALL TAKEN BY: Jane Livia  
 CASE#: \_\_\_\_\_ Call back second sheet

COMPLAINANT: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

**COPY**

COMPLAINT: c/o Woodend heat - 2nd grade child in room on med. c/o about heat in classroom. Child has Nathan as teacher.

Man ask principal - answer not satifac - dismissed. Call sup. office told them where order - 9/18/05 did not know when installation to take place.

OWNER: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

ACTION: Told complainant inspection to take place in week. Will call sup. office and call her back.

9/21 left message School Dept 9/23 left message 9/26 left message 9/23 missed call back from super.

INSPECTOR: Jane Livia DATE: \_\_\_\_\_