

CITY OF ST. MARYS  
**ACTION FORM**

\_\_\_\_/\_\_\_\_/20\_\_\_\_ @ \_\_\_\_\_ AM/PM

In person \_\_\_\_  
Telephone \_\_\_\_  
Other \_\_\_\_\_

Request made by: \_\_\_\_\_ Phone 785 / \_\_\_\_\_ - \_\_\_\_\_

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

Request/Complaint: \_\_\_\_\_

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

\_\_\_\_\_  
Person Receiving Request

\*\*\*\*\*  
\*Administrative\_\_\_\_ Parks & Rec \_\_\_\_\_ \*  
\*Fire Dept \_\_\_\_\_ Police Dept \_\_\_\_\_ Assigned By \_\_\_\_\_ \*  
\*GCclubhse \_\_\_\_\_ Street Dept \_\_\_\_\_ \*  
\*GC Grounds \_\_\_\_\_ Utility Dept \_\_\_\_\_ Dated \_\_\_\_\_ \*  
\*Inspections/Zoning \_\_\_\_\_ \*  
\*Original (tan copy) to Department Head, photocopy to City Manager=s file for follow up. \*  
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Corrective action taken as follows: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date completed: \_\_\_\_/\_\_\_\_/\_\_\_\_ @ \_\_\_\_\_ AM/PM Completed By: \_\_\_\_\_

Date Customer Contacted: \_\_\_\_/\_\_\_\_/\_\_\_\_ Spoke to: \_\_\_\_\_ Contacted By: \_\_\_\_\_