

Environmental Health Complaint Report

Today's Date: _____

Your name: _____

Your phone or email: _____

Do you wish to be notified about the investigative results? Yes No

Do you wish to be unidentified/remain anonymous? Yes No

Type of Complaint (check all that apply): Food/Restaurants Hotel/Motel Unsafe Housing Unsanitary Conditions
 Garbage Sewage Mold Water Supply/Wells Heat Electricity Animal Manure Bats
 Rodents/Insects Noise Other: _____

Address/Location of Complaint:

Description of complaint:

Property Owner/Contact: _____

Property Owner/Phone: _____

INSTRUCTIONS FOR SUBMITTING COMPLAINT REPORT

1. You may print and mail this report to: Eau Claire City-County Health Department, 720 Second Avenue, Eau Claire, WI, 54703 or
2. You may print and bring this report to the Health Department between the hours of 8am and 4:30pm Monday through Friday or
3. You may download and e-mail this report by choosing SUBMIT below or emailing to ehealth@co.eau-claire.wi.us.

SUBMIT