



# City Marshal's Office

City of Galveston  
3002 Ave H Ste B | Galveston, TX 77550-0779  
[www.galvestontx.gov](http://www.galvestontx.gov) | 409-797-3647

## Complaint Form

Case No.: \_\_\_\_\_

Date Submitted: \_\_\_\_\_

Referred to: \_\_\_\_\_

Please Print or Type

### I. Complainant Information

Do you wish to remain anonymous?

[ ] Yes

[ ] No

Complainant Name

( \_\_\_\_\_ )

Telephone

Mailing Address

( \_\_\_\_\_ )

Alternative Telephone and/or Fax

### II. COMPLAINT INFORMATION

Street Address/Location

(must be obtained prior to making complaint)

Specifically state the complaint:

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### III. DEPARTMENTAL RESPONSE:

Initial inspection date: \_\_\_\_\_

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