Policy for submitting a formal complaint in writing the Town of Brookeville.

PURPOSE

The Town of Brookeville (hereinafter also referred to as the "Town") wishes to establish a consistent and uniform process for processing and responding to Complaints, made in good faith, received by the Town.

DEFINITIONS

<u>Complaints</u>: A complaint expresses dissatisfaction regarding a violation of Town ordinances or a complaint about a staff member.

<u>Commissioners</u>: The Town Commissioners are elected officials responsible for local government and policymaking within the Town. They are the Town's legislative body, enacting ordinances, approving budgets, and making decisions on issues affecting the Town.

<u>Law Enforcement</u>: In Montgomery County, Maryland, the primary law enforcement agency is the Montgomery County Police Department (MCPD), including the Town of Brookeville. Please contact MCPD for violation of applicable law at 301-279-8000 or for Emergencies: Call 911

PROCESS

- 1. Your complaint must be in writing, or for legal and documentation purposes. Verbal complaints to the Town Commissioners are not acceptable.
- 2. Please note: Town Commissioners are unpaid volunteers and your neighbors. Please respect their time and privacy by using the complaint procedure outlined here or contact MCPD for any urgent issues.
- 3. Fill out the online complaint form or download a printable PDF version that you can return to the Town via email clerk@townofbrookevillemd.org or mail to Town of Brookeville, 5 High St, Brookeville, MD 20833, Attention: Municipal Complaint.
- 4. It is recommended that you first speak directly with the person(s) with whom you have an issue, in person or by telephone. Most complaints can be resolved promptly by the person in charge of the service.

Complaint Form

Complaints are public record

Please complete the following information so that the Town can investigate your complaint.

Complainant Information
Name:
Mailing Address:
Phone Number :
Email Address:
☐ I wish to remain anonymous
f requested, will you attend a Commissioners Meeting to explain your complaint? Yes \square No \square
Nature of Complaint: (include the date, time, place, and facts of your complaint)
Please explain how you believe this could be resolved or specific action you are requesting:
rease explain now you believe this could be resolved of specific action you are requesting.
f required, will you attend a court hearing to testify to the statements on this form? Yes \square No \square
Signature of complainant: Date
☐ I wish to remain anonymous Date