TOWN OF ENFIELD
REPORT MEMORANDUM

DATE: _____ **REPORT #** _____

TO: Town Manager

FROM: _____ **PHONE #** _____

ADDRESS: _____ **PHONE #** _____

_____

SUBJECT: ( ) COMPLAINT, ( ) OBSERVATION NEEDING ATTENTION, or ( ) REQUEST
( ) WATER/SEWER ISSUE: ACCT.# _____

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REFERRED TO: _____ **BY:** _____

[Please notify Town Manager if response will require more than 3 days.]

FACTS OR ACTION TAKEN:

DATE	TIME	

ATTACH PAGES AS NEEDED. WHEN COMPLETE, FORWARD THIS FORM TO TOWN MANAGER.

Town Manager Notes: _____