



**Burlington Township
Fire Department**
4548 Madison St
Clifford, MI 48727
Chief Jim Rye
810-614-7678
btfdst15@yahoo.com

Burlington Township Fire Department Complaint Form

The Burlington Township Fire Department strives to provide the highest quality of service to the citizens we serve. Should you have a complaint or concern, please fill out the following form and the matter will be investigated.

Your Information

Please check the box if you would like to file the complaint anonymously. Please be aware if the complaint is filed anonymously, it may limit the available information and final adjudication of the complaint.

Full Name: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Information about the Incident

Location: _____

Date: _____ Time: _____

Name of BTFD Personnel (If Known): _____

Name of Others Involved (If Known): _____

Name of Additional Witness (If Known): _____

Description: _____

Video? _____ Photographs? _____ Additional Documents? _____

Goal

What would you like to see happen as a result of this complaint?

Truth and Accuracy

Important Public Records Information

Information in this form is subject to public disclosure.

I certify the information contained in this form is accurate and complete to the best of my knowledge, belief, and ability. I understand all information disclosed on this form will be available to the public.

Signature: _____ Date: _____

Internal Action

Received By: _____ Date: _____
Print Sign

BTFD Officer: _____ Date: _____
Print Sign

BTFD Chief: _____ Date: _____
Print Sign

Type of complaint? Uniform Behavior Driving Policy Action Other

Disposition: _____

Date: _____