

**Township of Washington**  
**350 Hudson Avenue**  
**Resident Service Request Form**

**Please return completed form to Administration Office**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Tel No.: \_\_\_\_\_ Email: \_\_\_\_\_

What is the best way to contact you? \_\_\_\_\_

Description of Issue: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Category (Please check all applicable):

Building Code	___	Lighting	___	Soil Moving	___
DMF	___	Noise	___	Streets	___
Parking	___	Traffic	___	Drainage	___
Sewers	___	Tree Removal	___	Driveways	___
Environmental	___	Sidewalks	___	Fences	___
Signs	___	Zoning	___	Maintenance of Property	___
Snow Removal	___				

The Twp. of Washington's Service Request Form allows residents and visitors to request service, submit complaints and compliments, or make comments regarding the Twp. of Washington. You must submit your name, address, phone and an e-mail address so we can provide a response to your concerns.

Please note the Township will work promptly to address or respond to each issue. Emergent issues will be given priority. In general, a person filling out this form should expect a response within 5 to 10 working days except as may be required by law, and certain issues may take a longer period of time to address. This form is for NON-EMERGENCY problems, complaints, comments or concerns only. If immediate emergency services are needed please dial 911.

Anticipated Response Date (to be filled out by Township official): \_\_\_\_\_

Signature of Person Filing Form: \_\_\_\_\_

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*(For Township Use Only – Please Do Not Write On This Page)*

Referred by: \_\_\_\_\_

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

<u>Officer/Board</u>	<u>Response</u>	<u>Date</u>	<u>Initial</u>
Administrator			
Construction Official			
DMF Superintendent			
Health Officer			
Planning Board			
Police			
Township Attorney			
Township Engineer			
Zoning Officer			