



CITY OF MIDDLETON

P O Box 487, MIDDLETON, ID 83644
1103 W Main Street
208-585-3133
MIDDLETON.ID.GOV
EMAIL: citmid@middletoncity.com

ADMINISTRATION

COMPLAINT FORM

REV 8/2023

Complaint Information:

Address/Area of Complaint:

Property Owner (if known):

Name of Resident (if known/applicable):

Please describe your complaint:

Please indicate the approximate date(s) the violation(s) occurred:

Complainant Information:

Please provide us with your contact information in case there are any questions regarding your complaint.

Name	Phone Number	E-mail	
Address	City	State	Zip
Signature	Date		