



CITY OF BLAINE
435 MARTIN STREET, SUITE#3000
BLAINE, WA 98230
PH (360) 332-8311 FAX (360) 332-8330

CUSTOMER COMMENT OR REQUEST FOR SERVICE

Tracking No. _____

NAME _____ DATE _____

MAILING ADDRESS: _____ CITY _____ STATE _____ ZIP CODE _____

RESIDENCE: _____ CITY _____ STATE _____ ZIP CODE _____

PHONE NUMBER _____ FAX NUMBER _____ EMAIL ADDRESS _____

COMMENTS:

FOR OFFICE USE ONLY

SIGNATURE

DATE

NOTE: YOU ARE NOT REQUIRED TO PROVIDE YOUR PERSONAL INFORMATION ON THIS FORM. HOWEVER, IF YOU CHOOSE TO DO SO, CERTAIN INFORMATION THAT YOU PROVIDE MAY BE SUBJECT TO DISCLOSURE AS OUTLINED IN THE PUBLIC RECORDS ACT RCW 42.56.