## MUNICIPALITY OF ANCHORAGE



This form can be filled out and saved on your computer. Then you can either print out a copy and mail it to the Ombudsman or attach a copy to a email and submit it to: OMBUD@muni.org

## **COMPLAINT FORM**

The Ombudsman's Office was established in addition to other remedies or rights of appeal, as an independent, impartial municipal office, readily available to the public, responsible to the Assembly, empowered to investigate the acts of Municipal agencies and Anchorage School District, and to recommend appropriate changes toward the goals of safeguarding the rights of persons and of promoting higher standards of competency, efficiency, and equity in the provision of municipal services.

Please fill out and mail to:

Municipal Ombudsman
PO Box 196650
Anchorage, AK 99519-6650

Attach to a email and send to:

OMBUD@muni.org

Name			Date
Address			
City	State		Zip
Phone Number	Alt. Phone Nu	mber	
Email Address:			
Name of municipal department you are complaining about:			
Have you tried to resolve the complaint with the department?	YES	NO	
*It is important to try to resolve your issue with t	the agency's h	nelp before inv	volving the ombudsman.
Please provide names and contact information for people you h	ave spoken with	and what their	response was to your complaint.

## MUNICIPALITY OF ANCHORAGE OMBUDSMAN COMPLAINT FORM

"The Ombudsman may investigate the administrative acts of agents of the municipality,...The ombudsman shall be barred from inquiry into acts of the mayor, the

assembly or school board." AMC 2.60.110.A. D	
What did the department do that you think is wrong?	
What do you want from the department? Please provide nvestigate your complaint.	any other information we may need to help us
'IMPORTANT We will not give out your name withou your name when talking to the agency? YES	ut your consent. Do you give permission to use  NO Initial
Use this space to provide any further information you fee The Municipal Ombudsman only investigates comple f necessary.	
What do you want the Ombudsman to do for you?	
Signature	Date