



Town of Hampton

Resident Inquiry and Comment Form

Fill out this form if you have an inquiry, comment, request or complaint.

Date _____

Time _____

Date of Incident _____

Approximate Time of Incident _____

Name _____

Civic Address _____

Telephone Number _____

Cell Phone Number _____

What is the nature of the inquiry / comment / request / complaint?

Attachments N Y # _____

Received By _____

Date _____