

FIRE DEPARTMENT

CITY OF VENTNOR
DEPARTMENT OF PUBLIC SAFETY

Thomas M. Halpin, Jr., Fire Official
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COMPLAINT / PROBLEM REPORT

Date: _____

Time: _____

Address: _____

Person Reporting Problem: _____

Description of Conditions: _____

Person Responding to Complaint: _____

ACTION TAKEN: _____

Complaint #: _____ Date/Time: _____

STOP FIRES-SAVE LIVES