SOUTHERN COLORADO
BUILDING
DEPARTMENT

830 N Main Street | Pueblo, CO 81003

CUSTOMER COMPLAINT FORM

Please complete this form and return it to Southern Colorado Building Department, mail to above address, or email to permits@socobd.com

Your Name_____Today's Date_____

Your Address_____

Your Phone Number_____

Address of Complaint_____

Date that Complaint Occured_____

What is your Complaint or Comment (Please be specific, you may use the back of this form or attach an addition sheet)?

_____
_____
_____
_____
_____

What would you like to have done as a Result of this Complaint?

_____
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_____

What other Information do you think is Important for Us to know?

_____
_____
_____
_____
_____

**********DO NOT WRITE BELOW THIS LINE**********

Date Received_____Date Reviewed_____Reviewed By_____

Office: 719-543-0002
Fax: 719-543-0062

socobd.com