



Citizen Action Form

Please complete and mail/return to Fife City Hall: 5411 23rd St. E, Fife WA 98424

Date: _____ Time: _____

Name of person with comment/suggestion: _____

Address: _____

Email: _____

Phone: _____

Nature of issue: _____

City use only:

Name of person accepting form: _____

Name of person responding to issue: _____

Final Action: _____

Date/time completed: _____

cc: City Manager

Department Director of affected department: _____

Records Management