



CITY OF LIVINGSTON CITIZEN REPORT FORM

1416 C Street Livingston, CA 95334

Phone: (209) 394-8041 Fax: (209) 394-4190

Email: utilities@livingstoncity.com

Today's Date:

Nature of Concern (check all applicable):

- | | | | |
|-----------------|------------------|---------------------|--------------|
| Health & Safety | Zoning Violation | Inoperative Vehicle | Animal Issue |
| Weed Abatement | Curbside | Water | Sewer |
| Recreation | Street Light Out | Graffiti | Other |

REPORTING PARTY	
Name (Last, First M.):	
Phone Number:	
Address:	
Problem Address:	
Description of Problem:	
If Abandoned Vehicle:	<div style="display: flex; justify-content: space-between;"> Public Property Private Property </div> How Long: Vehicle Make/Model: Vehicle License Plate:
Would you like to be contacted with updates concerning your report? <div style="float: right; text-align: right;"> YES NO </div>	
<i>(If YES, Please provide email below)</i>	
Email Address:	
* All reports are kept confidential	

OFFICE USE ONLY

Received By:	Date:		
Forwarded To:			
Administration	Building	Planning	Police
Recreation	Other		Public Works
Resolved On:			
Follow-Up Action:			